OR SUBCONTRACTOR

Wage and Hour Division

NAME OF CONTRACTOR

PAYROLL



(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

Rev. Dec. 2008

ADDRESS 740 Twin Rail Dr

OMB No.: 1235-0008

Lindahl Marine Contractors, Inc									Minooka IL 60447								Expires:	01/31/2015		
PAYROLL NO. 006		FOR WEEK ENDIN	FOR WEEK ENDING 11/01/2013 (3) (4) DAY AND DATE						Clea	CT AND LOCAT In Raw Water Il Station Gre		ois				OR CONTRAC 12-C-3015				
(1)	SNO SNO	(3)	R ST.	М		DA'	Y AND	F	re S	s	(5)	(8)	(7)			DEC	(8) DUCTIONS			(9) NET
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WATH-HOLDING EXEMPTIONS	WORK CLASSIFICATION	OT.OR		22 HOUR	L	24 PRKE	25 EAC		27 Y	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	State	County	OTHER	TOTAL DEDUCTIONS	WAGES PAID
(b) (6)	3	Operating Enginners FLT Class 1	s	⊢	B.00	2.00	200	2.00			22.00	\$76.95 51.30	\$1,128.60	\$123.96	\$168.21	\$53.13	\$8.10	\$40.73	\$394.13	\$1,708.23
(b) (6)	8	Operating Enginners FLT Class 1	o s	N.06	8.00	2,00	2,00	2.00			22.00	\$76.95 51.30	\$1,128.60	\$121.61	\$107.32	\$54.04	\$49.75	\$34.25	\$366.97	\$2,376.01
(b) (6)	1	Operating Enginners FLT Class 1	o s	 -	K.00	2.00	1,00	8.00			1.00	\$74.70	\$2,742.98	\$140.33	\$351.81	\$61.72	\$57.42	\$44.20	\$655.48	\$1,612.42
(b) (6)	2	Operating Enginners FLT Class 1	o	├	2.00	2.00	2,00	2.00	-		16.00	\$76.95	\$2,287.90	\$82.25	\$97.67	\$53.76		\$27.09	\$260,77	\$1,277.53
(b) (6)	1	Operating Enginners FLT Class 1	0	-	N.00	2.00	2.00	2,00			22.00	\$76.95 51.30	\$1,128.60	\$120.38	\$285.78	\$52.85	\$49.25	\$39.56	\$547.82	\$1,472.74
			٥	┝									42.02.0							
#WANTED TO THE PARTY OF THE PAR	-		3	⊢						_			\leftarrow						<u> </u>	
			s	┡	-					\vdash										
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a), The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week," U.S. Department of Labor (DCL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Sacon prevailing wage rate for the work performed, DOL and federal contracting agencies receiving this information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We astimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room \$3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date11/01/2013		(b) WUGOG FOILIOF PONTERT	C ADE DAID IN CACH
(b) (6)(b) (6)	Office Manager	(b) WHERE FRINGE BENEFIT:	
(Name of Signatory Party)	(Title)		or mechanic listed in the above referenced payroll has been paid, on the payroll, an amount not less than the sum of the applicable
do hereby state:		basic hourly v	an the payroli, an amount not less than the sum of the applicable wage rate plus the amount of the required fringe benefits as listed to except as noted in section 4(c) below.
(1) That I pay or supervise the payment of the	persons employed by		, and a state of the state of t
Lindahl Marine C	ontractors, Inc on the	(c) EXCEPTIONS	
(Contractor or Sub	contractor)	EXCEPTION (CRAFT)	EXPLANATION
Naval Station Great Lakes, Illinois	: that during the payroll period commencing on the		
(Building or Work)	05 0000		
	ending the 25 day of Ocotober 2013		
all persons employed on said project have been paid been or will be made either directly or indirectly to or	I the full weekly wages earned, that no rebates have on behalf of said		
Lindahl Marine Col	from the fu	1	
(Contractor or Su	bcontractor)		
weekly wages earned by any person and that no de from the full wages earned by any person, other tha 3 (29 C.F.R. Subtitle A), issued by the Secretary of 63 Start, 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C.	n permissible deductions as defined in Regulations, Part Labor under the Copeland Act, as amended (48 Stat. 94)	3,	
	· · · · · · · · · · · · · · · · · · ·		
	· or successive desirious.		
		REMARKS:	
correct and complete; that the wage rates for labore	ract required to be submitted for the above period are ers or mechanics contained therein are not less than the ination incorporated into the contract; that the classificati m with the work he performed.	ons	
program registered with a State apprenticeship age:	such recognized agency exists in a State, are registered	ı	
(4) That:	70 ADDDOUGD BLAND GUIDO	NAME AND TITLE	COUTUSE
• • • • • • • • • • • • • • • • • • • •	D TO APPROVED PLANS, FUNDS, OR PROGRAMS	(b) (6)	(h) (6)(h) (6)
— in addition to the basic hourh	y wage rates paid to each laborer or mechanic listed in	Office Manager	(D)
the above referenced payrol	l, payments of fringe benefits as listed in the contract	THE WILLFUL FALSIFICATION OF ANY OF	F THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR
have been or will be made to except as noted in section 40	appropriate programs for the benefit of such employees, b) below.	SUBCONTRACTOR TO CIVIL OR CRIMINAL 31 OF THE UNITED STATES CODE.	PROSECUTION, SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

except as noted in section 4(c) below.

PAYROLL



Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

		Persons are not i	equ	ired to	o resp	ond	to the	e col	lection				* *	y valid OME	3 control nur	nber.			Rev. Dec	. 2008	
NAME OF CONTRACTOR OR SUBCONTR	ACTOR										ADDRE	SS 740 Twin	Rail Dr.							: 1235-0008	
Lindah	l Marin	e Contractors, Inc										Minooka					T		Expires: 01/31/2015		
PAYROLL NO. 009		FOR WEEK ENDING		1/10/	2013	i					PROJECT AND LOCATION Clean Raw Water intake Naval Station Great Lakes, Illinois						PROJECT OR CONTRACT NO. N40083-12-C-3015				
(1)	(2) SAS SAS	(3)	ŝī.	М	· ·	W	Y AND	_	_	s	(5)	(6)	(7)			DED	(8) SUCTIONS			(9)	
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO, OF WITHPHOLDING EXEMPTIONS	WÖRK CLASSIFICATION	OT. OR ST.	11 F	12 OURS	13 S WC	14 RKE	15 EAC		17 Y	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FIÇA	WITH- HOLDING TAX	State	County	OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK	
(b) (6)	3	Operating Engineers FLT	٥						ļ	<u> </u>		\$76.95	\$1,026.00	\$103.73	\$128.54	\$44.14	\$6.78	\$27.05	\$310.24	\$1,407.76	
		Class 1	S		2.00	8.00	2.00	8.00			20.00	51.30	\$1,718.00								
(b) (6)	8	Operating Engineers FLT Class 1	0		2,00	K,60	2.00	8.00			20.00	\$76.95 51.30	\$1,026.00	\$103.13	\$71.09	\$ 45.83	\$42.19	\$27.05	\$289.29	\$1,420.71	
(b) (6)		Operating	0						-	-	20.00	\$76.95	\$1,710.00								
(D)	1	Engineers FLT Class 1	s		2.00	H.00	2.00	8.00			20.00	51,30	\$1,667.20	\$99.84	\$218.68	\$43.72	\$40.85	\$26.90	\$429.99	\$1,237.21	
(b) (6)	2	Operating Engineers FLT	٥						ļ			\$76.95	\$410,40	\$122.96	\$275.43	\$80.36		\$33.56	\$512.31	\$1,434.09	
(\mathbf{D})	_	Class 1	\$					8,00			8.00	\$1.30	\$1,946.40								
(h) (6)	2	Operating Engineers FLT	٥									\$76.95	\$1.026.00	\$101.75	\$135.89	\$66,50		\$26,90	\$331.04	\$1,360.96	
(D)		Class 1	s		2.00	×.00	2.00	8.00			20.00	51.30	\$1,692.00			,				. , , , , , , ,	
(h) (6)	0	Operating Engineers FLT	0									\$74.70	\$398.40	\$100.74	\$240.33	\$65.84		\$28.04	\$ 434.95	\$1,221.05	
(D)	*	Class 1	s					8.00			8.00	49.80	\$1,656.00								
			٥																		
an analysis of the second seco	<u> </u>		s					L					/	,							
			٥] /								
			s								1										

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.6(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed, DOL and federal contracting agencies receiving this information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

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Date 11/21/2013			
(b) (6)	Office Manager	(b) WHERE FRINGE BENEFITS ARE PAID IN	
(Name of Signatory Party)	(Title)	☐ — Each laborer or mechanic lis	sted in the above referenced payroll has been paid,
do hereby state:	, ,	basic hourly wage rate plus to in the contract, except as no	an amount not less than the sum of the applicable the amount of the required fringe benefits as listed
(1) That I pay or supervise the payment of the p	ersons employed by		ted in Section 4(c) below.
Lindahl Marine Co	intractors, Inc	(c) EXCEPTIONS	
(Contractor or Subc	ontractor) on the	EXCEPTION (CRAFT)	EXPLANATION
Navel Station Great Lakes, Illinois (Building or Work)	; that during the payroll period commencing on the		ZAFDANATION
11 day of November 2013 and e	nding the 17 day of November 2013		
all persons employed on said project have been paid been or will be made either directly or indirectly to or or	the full weekly wages earned, that no rehates have		444
Lindahl Marine Con	tractors, Inc		
(Contractor or Sub	contractor) from the full		
weekly wages earned by any person and that no dec from the full wages earned by any person, other than 3 (29 C.F.R. Subtitle A), issued by the Secretary of Li 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. §	permissible deductions as defined in Regulations, Part		
3	o thoj, and described below.		
		i i	
- William - Will	10000		****
		REMARKS:	
correct and complete; that the wage rates for laborers	act required to be submitted for the above period are sor mechanics contained therein are not less than the nation incorporated into the contract; that the classifications with the work he performed.		
program registered with a State apprenticeship agence	such recognized agency exists in a State, are registered		
(4) That:	TO ADDROVED BLANC CINIDO OD DOCCO	NAME AND TITLE	
[7]	TO APPROVED PLANS, FUNDS, OR PROGRAMS	(b) (6)	(h) (6)
- in addition to the basic hourly	wage rates paid to each laborer or mechanic listed in	Office Manager	(D)
have been or will be made to a except as noted in section 4(c)	payments of fringe benefits as listed in the contract propriate programs for the benefit of such employees, below.	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STA SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. S 31 OF THE UNITED STATES CODE.	TEMENTS MAY SUBJECT THE CONTRACTOR OR SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

Wage and Hour Division

PAYROLL



(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

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U.S. Wage and Hour Division Rev. Dec. 2008

NAME OF CONTRACTOR OR SUBCONTRA	•	_						A	DDRE	SS 740 Twin Minooka							OMB No.	: 1235-0008 01/31/2015	
PAYROLL NO.	riviarin	e Contractors, Inc								CT AND LOCAT	ION		*****		PROJECT C	OR CONTRAC			
009	·		11	/10/20					Nava	n Raw Wate I Station Gre	r intake eat Lakes, Illin	ois			N40083-	12-C-3015			
(1)	1	(2) (3) (4) DAY AND DATE (5) (6) (7)					DED	(8) UCTIONS		(9)									
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO, OF VATHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. OR	4 S		7 ORKE	8 EAC	 10 _T	OTAL IOURS	RATE OF PAY	GROSS AMQUNT EARNED	FICA	WITH- HOLDING TAX	State	County	OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK	
(h) (6)	3	Operating Engineers FLT	٥			2.50		:	2.50	\$76.95	\$1,423.58	\$158.67	\$265.74	\$68.55	\$10.37	\$52.32	\$555.65	\$1,651.93	
		Class 1	ş		H.00	8.00	8.00	:	24.00	51.30	\$2,207.58			,,,,,,,					
(h) (6)	8	Operating Engineers FLT	0		1	2.50		_ :	2.50	\$76.95	\$1,423.58	\$157.43	\$177.58	\$69.97	\$64.41	\$51.92	\$521.31	\$1,670.27	
(D)(O)		Class 1	s		8.00	8,00	K.00		24.00	\$1,30	\$2,191.58	i .					4		
(h)	1	Operating Engineers FLT	0				2.50		2.50	\$76.95	\$1,423.58	\$151,81	\$393.79	\$66.81	\$62.11	\$50.08	\$724.60	\$1,393.38	
(D)(D)		Class 1	s		X.00	8.00	8.06	2	24.00	51.30	\$2,117.98	3131,61	\$575.77	300.81	302.11	350.00	\$724.00		
	2	Operating Engineers FLT	0			2.50		:	2.50	\$ 76.95	\$602.78	\$148.47	\$360,59	\$97.04		\$49.05	\$655.15	\$1,316.76	
(O)(O)		Class 1	s			B.00			8.00	51.30	\$1,971.91	3140147	\$300.59	\$97.04		349.03	\$655.15	\$1,310.70	
	2	Operating Engineers FLT	0			2.50		_ :	2.50	\$76.95	\$1,013.18	\$133.54	\$202.39	\$87.28		040.07	0467.10	01.417.46	
		Class 1	s			K,06	8.00	_	16.00	51.30	\$1,884.64	\$133.54	\$202.39	387.40		\$43.97	\$467.18	\$1,417.46	
	1	Operating Engineers FLT	0			2.50		:	2.50	\$76.95	\$602.78	\$69.62	\$119.86	\$43.53		\$22.80	\$255.81	\$718.97	
	·	Class 1	s		\perp	¥,00		!	8.00	51.30	\$974,78	307.02	\$119.00	\$45.55		322,00	\$233.01	3/10.9/	
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White completion of Form WH-347 is optional, it is mandatory for covered contractors and subconfractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act
(40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at
29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborar
or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date 11/21/2013				
(b) (6)	Office Manager	(b) WHERE FRING	GE BENEFITS ARE PAID I	N CASH
(Name of Signatory Party)		□-1	Each laborer or mechanic li	isted in the above referenced payroll has been paid.
do hereby state:	(Title)		as indicated on the payroll.	an amount not less than the sum of the applicable
			pasic nourly wage rate plus in the contract, except as n	the amount of the required friend bonefits on linear
(1) That I pay or supervise the payment of the per		(c) EXCEPTIONS		355 III 55501011 4(6) 5610W.
Lindahl Marine Con (Contractor or Subcor		(C) EXCEPTIONS		
Navel Station Great Lakes, Illinois	•	EXCEPTI	ION (CRAFT)	EXPLANATION
(Building or Work)	; that during the payroli period commencing on the		w	
04	ing the 10 day of November 2013			
all persons employed on said project have been paid the been or will be made either directly or indirectly to or on	e full weekly wages carned, that an exhate have		у.	
Lindahl Marine Contra	actors, Inc			
(Contractor or Subco	ntractor) from the full			
weekly wages earned by any person and that no deduction the full wages earned by any person, other than person (29 C.F.R. Subtitle A), issued by the Secretary of Lab 63 Start. 108, 72 Stat. 967; 76 Stat. 367; 40 U.S.C. § 31	immissible deductions as defined in Regulations, Part	- 1		
50 cmm 100, 12 cmm 507, 70 cmm 507, 40 0.5.0. § 5	45), and described below:			
			· · · · · · · · · · · · · · · · · · ·	
	10.00			
		REMARKS:		
(2) That any payrolls otherwise under this contract correct and complete; that the wage rates for laborers of applicable wage rates contained in any wage determinant set forth therein for each laborer or mechanic conform was	r mechanics contained therein are not less than the			
(3) That any apprentices employed in the above per program registered with a State apprenticeship agency r Training, United States Department of Labor, or if no sur with the Bureau of Apprenticeship and Training, United S	ecognized by the Bureau of Apprenticeship and			4
(4) That:				//
	APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE		SIGNATURE /
- in addition to the basic bourty wa	ge rates paid to each laborer or mechanic listed in	(b) (6)(b) (6)		(b) (6)
me above referenced payrou, ba	VMENts of fringe hangite as listed in the appearant	Office Manager	ON OF ANY OF THE ABOVE STA	$Q(\mathbf{D})$
have been or will be made to appr except as noted in section 4(c) be	Opriate programs for the benefit of cuch ampleuses	SUBCONTRACTOR TO CIVIL 31 OF THE UNITED STATES C	OR CRIMINAL PROSECUTION &	TEM SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

PAYROLL

Employment Standards Administation Wage and Hour Division

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

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NAME OF CONTRACTOR ADDRESS OMB No.: 1215-0149 Mersino Dewatering Inc. 10162 E. Coldwater Rd PAYROLL NO. 11 FOR WEEK ENDING PROJECT AND LOCATION PROJECT OR CONTRACTOR NO. Clean Raw Water Intake 12/8/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (1) (3) (4) DAY AND DATE (9)DEDUCTIONS ST. T F s s NET WORK WAGES S. CLASSIFI 2-Dec 3-Dec 4-Dec 5-Dec 6-Dec 7-Dec TOTAL PAID NAME, ADDRESS, AND CATION GROSS WITH-DEDUCTIONS FOR WEEK SOCIAL SECURITY NUMBER HOURS WORKED EACH DAY TOTAL RATE AMOUNT HOLDING OF EMPLOYEE HOURS OF PAY EARNED TAX STATE DUES OTHER Operator WM 4.5 4.5 \$ 66.53 \$ 299.36 \$ 50.04 50.04 \$ 604.12 s 8 8 \$ 44.35 | \$ 354.80 Operator WM 0 6 4.5 2 0.5 \$ 66.53 | \$ 864.83 13 \$201.87 \$ 201.87 \$ 2,436.95 S 8 8 8 8 8 40 \$ 44.35 \$1,774.00 Operator WM 0 4.5 4.5 \$ 66.53 | \$ 299.36 \$ 50.04 50.04 \$ 604.12 S 8 8 \$ 44.35 \$ 354.80 Operator V/IM 0 5.5 1.5 2 3.5 12.5 \$ 55.28 | \$ 690.94

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS

32

122.5

\$ 36.85 | \$1,179.20

\$5.817.29

\$143.07



8

27.5

8

49

8

19.5

8

18

8.5



\$ 143.07

\$ 1,727.07

Date 12/12/2013		(b) WHERE FRINGE BENEFITS ARE PAID	IN CASH
I, (b) (b) (b) (c) Payroll Specialist (Name of Signatory Party) (Title do hereby state:	a)	indicated on the payroll, an a	ed in the above referenced payroll has been paid, as mount not less than the sum of the applicable basic rount of the required fringe benefits as listed in the ction 4(c) below.
P/(1) That I pay or supervise the payment of the persons employed by			
Mersino Dewatering, Inc		(c) EXCEPTIONS	
(Contractor or Subcontractor)	on the	EXCEPTION (CRAFT)	EXPLANATION
Clean Raw Water Intake-Naval Station Great Lakes, Illino; that during the payroll period (Building or Work)	commencing on the	***************************************	
2 day of <u>December</u> , <u>2013</u> , and ending the <u>8</u> day of all persons employed on said project have been paid the full weekly wages earned, that r	f December 2013 . no rebates have		
Mersino Dewatering Inc.	from the full		Monte of the Control
		REMARKS:	
(2) That any payrolls otherwise under this contract required to be submitted for the a that the wage rates for laborers or mechanics contained therein are not less than the a wage determination Incorporated into the contract; that the classifications set forth thereir with the work he performed.	applicable wage rates contained in any		
(3) That any apprentices employed in the above period are duly registered in a bona swith a State apprenticeship agency recognized by the Bureau of Apprenticeship and Tabor, or if no such recognized agency exists in a State, are registered with the Bureau of States Department of Labor.	Training United States Department of		
(4) That:			
(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS,	OR PROGRAMS	NAME AND TITLE	(b) (6)(b) (6)
 in addition to the basic hourly wage rates paid to each lat referenced payroll, payments of fringe benefits as listed in to to appropriate programs for the benefit of such employees, ex 	he contract have been or will be made	THE WILLFUL FALSIFICATION OF ANY OF THE ABO SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTI TITLE 31 OF THE UNITED STATES CODE.	VE STATEMENTS MAY SUBJECT THE CONTRACTOR OR ON SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF

PAYROLL

Employment Standards Administation Wage and Hour Division

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

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NAME OF CONTRACTOR ADDRESS OMB No.: 1215-0149 Mersino Dewatering Inc. 10162 E. Coldwater Rd PAYROLL NO. 10 FOR WEEK ENDING PROJECT AND LOCATION PROJECT OR CONTRACTOR NO. Clean Raw Water Intake 12/1/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (1) (3) (4) DAY AND DATE (7) (9) DEDUCTIONS M s OR ST. NET WORK WAGES CLASSIF 25-Nov 26-Nov 27-Nov 28-Nov 29-Nov 30-Nov TOTAL 1-Dec PAID NAME, ADDRESS, AND CATION 9 GROSS WITH-DEDUCTIONS | FOR WEEK SOCIAL SECURITY NUMBER HOURS WORKED EACH DAY TOTAL RATE AMOUNT HOLDING OF EMPLOYEE HOURS OF PAY EARNED FICA TAX STATE DUES OTHER 0 \$ No Activity \$ -0 \$ 0 \$ \$ -0

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF



Date 12/12/2	2013		(b) WHERE FRINGE BENEFITS AR	E PAID IN CASH
(, (b) (6)(b) (6) (Nam do hereby state:	Payroll Specialist The of Signatory Party) (Total	itle)	indicated on the payre hourly wage rate plus	anic listed in the above referenced payroll has been paid, as oll, an amount not less than the sum of the applicable basics the amount of the required fringe benefits as listed in the ed in Section 4(c) below.
	pervise the payment of the persons employed by		(c) EXCEPTIONS	
Mersino Dewateri	ng, Inc (Contractor or Subcontractor)	on the	EXCEPTION (CRAFT)	EXPLANATION
Clean Raw Water Inta	ake-Naval Station Great Lakes, Illino; that during the payroll periodiliding or Work)	od commencing on the		
25 day of all persons employed	November , 2013 , and ending the 1 day on said project have been paid the full weekly wages earned, the	ofDecember		
Mersino Dewatering Ir	nc.	from the full		
			REMARKS:	
that the wage rates fo	is otherwise under this contract required to be submitted for the or laborers or mechanics contained therein are not less than the corporated into the contract; that the classifications set forth the rmed.	applicable wage rates contained in any		
with a State apprentic	tices employed in the above period are duly registered in a bon ceship agency recognized by the Bureau of Apprenticeship and cognized agency exists in a State, are registered with the Burea Labor.	Training United States Department of		
(4) That:			No Activity	
(a) WHERE	FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUND		NAME AND TITLE	(b) (6)
	 in addition to the basic hourly wage rates paid to each referenced payroll, payments of fringe benefits as listed in to appropriate programs for the benefit of such employees 	n the contract have been or will be made	(b) (6)(b) (6)(b) (6) Pay THE WILLFUL FALSIFICATION OF ANY OF SUBCONTRACTOR TO CIVIL OR CRIMINAL PR TITLE 31 OF THE UNITED STATES CODE.	THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR OSECUTION, SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF

PAYROLL

Employment Standards Administation Wage and Hour Division

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

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NAME OF CONTRACTOR ADDRESS OMB No.: 1215-0149 Mersino Dewatering Inc. 10162 E. Coldwater Rd PAYROLL NO. 9 FOR WEEK ENDING PROJECT AND LOCATION PROJECT OR CONTRACTOR NO. Clean Raw Water Intake 11/24/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (1) (3) (4) DAY AND DATE (6) (7) (9) **DEDUCTIONS** ST. s s NET WORK WAGES OR CLASSIFI 20-Nov 21-Nov 22-Nov 23-Nov 24-Nov 18-Nov 19-Nov TOTAL PAID NAME, ADDRESS, AND CATION OT. GROSS WITH-DEDUCTIONS FOR WEEK SOCIAL SECURITY NUMBER HOURS WORKED EACH DAY TOTAL RATE AMOUNT HOLDING OF EMPLOYEE HOURS OF PAY EARNED FICA STATE DUES OTHER TAX \$ No Activity \$ \$ 0 \$ 0 \$ \$ \$ 0 \$

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- Date	11/227/2013			(b) WHERE FRINGE BENEFITS ARE PAID IN	N CASH
I, (b) (6)	(Name of Signatory Party)	Payroll Specialist (Title)		indicated on the payroll, an am	d in the above referenced payroll has been paid, as nount not less than the sum of the applicable basic bunt of the required fringe benefits as listed in the tion 4(c) below.
	I pay or supervise the payment of the persons of	employed by		(c) EXCEPTIONS	
Mersillo L	Dewatering, Inc (Contractor or Subco	ontractor)	on the	EXCEPTION (CRAFT)	EXPLANATION
Clean Raw \	Water Intake-Naval Station Great Lakes, Illino (Building or Work)	that during the payroll period commencing	g on the		
	ay of <u>November</u> , <u>2013</u> , a employed on said project have been paid the fu	and ending the 24 day of Novemb ill weekly wages earned, that no rebates h	per 2013 . ave		
Mersino Dev	watering Inc.		from the full		
that the wag wage determ	any payrolls otherwise under this contract requipe rates for laborers or mechanics contained to innation incorporated into the contract; that the k he performed.	herein are not less than the applicable w	age rates contained in any	REMARKS:	
with a State Labor, or if n	any apprentices employed in the above period a apprenticeship agency recognized by the Bu no such recognized agency exists in a State, a artment of Labor.	reau of Apprenticeship and Training, Ur	ited States Department of		
(4) That:				No Activity	
	WHERE FRINGE BENEFITS ARE PAID TO	APPROVED PLANS, FUNDS, OR PROGR	RAMS	NAME AND TITLE	(b) (6)(b) (6)
	referenced payroll, payments	y wage rates paid to each laborer or me of fringe benefits as listed in the contract he benefit of such employees, except as no	have been or will be made	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION OF THE UNITED STATES CODE.	/E STATEMENTS MAY SUBJECT THE CONTRACTOR OR ON, SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF

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Employment Standards Administation Wage and Hour Division

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

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NAME OF CONTRACTOR ADDRESS OMB No.: 1215-0149 Mersino Dewatering Inc. 10162 E. Coldwater Rd PAYROLL NO. 8 FOR WEEK ENDING PROJECT AND LOCATION PROJECT OR CONTRACTOR NO. Clean Raw Water Intake 11/17/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (1) (3) (4) DAY AND DATE (6) (7) DEDUCTIONS W NET M Т F ST. S S WORK WAGES OR CLASSIFI TOTAL 11-Nov 12-Nov 13-Nov 14-Nov 15-Nov PAID 16-Nov 17-Nov NAME, ADDRESS, AND CATION Р. GROSS WITH-DEDUCTIONS FOR WEEK SOCIAL SECURITY NUMBER TOTAL RATE AMOUNT HOURS WORKED EACH DAY HOLDING OF EMPLOYEE HOURS OF PAY EARNED FICA TAX STATE DUES OTHER \$ No Activity \$ \$ 0 \$ \$ \$ 0 \$ 0

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Date11/20/2013	(b) WHERE FRINGE BENEFITS ARE PAID IN CASH
I, (b) (6)(b) (6)(b) (6) (Name of Signatory Party) Payroll Specialist (Title) do hereby state:	Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noed in Section 4(c) below.
P/ (1) That I pay or supervise the payment of the persons employed by	
Mersino Dewatering, Inc on the (Contractor or Subcontractor)	(c) EXCEPTIONS EXCEPTION (CRAFT) EXPLANATION
Clean Raw Water Intake-Naval Station Great Lakes, Illino; that during the payroll period commencing on the (Building or Work)	
11 day of November, 2013, and ending the 17 day of November 2013. all persons employed on said project have been paid the full weekly wages earned, that no rebates have	
Mersino Dewatering Inc. from the full	
	REMARKS:
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination Incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.	
(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.	
(4) That;	No Activity
(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE
 in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below. 	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF JITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

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Employment Standards Administation Wage and Hour Division

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

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NAME OF CONTRACTOR П ADDRESS OMB No.: 1215-0149 Mersino Dewatering Inc. 10162 E. Coldwater Rd PAYROLL NO. 7 FOR WEEK ENDING PROJECT AND LOCATION PROJECT OR CONTRACTOR NO. Clean Raw Water Intake 11/10/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (1) (3) (4) DAY AND DATE (6) DEDUCTIONS ST. M F s S NET WORK WAGES S CLASSIFI TOTAL 7-Nov 4-Nov 5-Nov 6-Nov 8-Nov 9-Nov 10-Nov PAID NAME, ADDRESS, AND CATION OT. GROSS WITH-DEDUCTIONS FOR WEEK SOCIAL SECURITY NUMBER HOURS WORKED EACH DAY TOTAL RATE AMOUNT HOLDING OF EMPLOYEE HOURS OF PAY EARNED FICA TAX STATE DUES OTHER 0 \$ No Activity \$ 0 \$ 0 \$ \$ \$ 0 \$

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Date	11/13/2013	(b) WHERE FRINGE BENEFITS ARE	PAID IN CASH
do hereb	(Name of Signatory Party) Payroll Specialist (Title) by state:	indicated on the payroll	nic listed in the above referenced payroll has been paid, as , an amount not less than the sum of the applicable basic the amount of the required fringe benefits as listed in the d in Section 4(c) below.
P# (1) Th	nat I pay or supervise the payment of the persons employed by	(c) EXCEPTIONS	
Mersino	o Dewatering, Inc on the (Contractor or Subcontractor)	EXCEPTION (CRAFT)	EXPLANATION
Clean Ra	aw Water Intake-Naval Station Great Lakes, Illino ; that during the payroll period commencing on the (Building or Work)		
4 all person	day of <u>November</u> , <u>2013</u> , and ending the <u>10</u> day of <u>November</u> <u>2013</u> . ns employed on said project have been paid the full weekly wages earned, that no rebates have		77.107.000
Mersino I	Dewatering Inc from the full		
		REMARKS:	
that the v wage det	at any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any termination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform work he performed.		
with a St Labor, or	at any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered tate apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United epartment of Labor.		
(4) Tha	at:	No Activity	TO THE PARTY OF TH
, ,	(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above	NAME AND TITLE	(b) (6)
	referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.	THE WILLFUL FALSIFICATION OF ANY OF TH SUBCONTRACTOR TO CIVIL OR CRIMINAL PRO TITLE 31 OF THE UNITED STATES CODE.	DII HE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF

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Employment Standards Administation Wage and Hour Division

NAME OF CONTRACTOR

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

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	hand									TODITLOG								OWIE	3 NO.: 1215-C
Mersino Dewatering Inc.										10162 E	. Coldwa	ter Rd							
AYROLL NO. 6	FOR WEE	KEN	DING							PROJECT A	ND LOCATIO	N				PROJECT C	OR CONTRAC	TOR NO.	
143	11/3/20	013									v Water Intal on Great Lal					N40083-	12-C-3015	5	
(1)	(3)	-	-		(4) D/	AY AND E	DATE				(6)	(7)			DE	(8) EDUCTIONS		,,,,,,,,	(9)
NAME, ADDRESS, AND	WORK CLASSIFI		M 28-Oct	T 29-Oct	W 30-Oct	31-Oct	F 1-Nov	S 2-Nov	S 3-Nov									TOTAL	NET WAGE PAID
SOCIAL SECURITY NUMBER OF EMPLOYEE	CATION	OT.		Н	IOURS W	ORKED E	ACH DAY	′		TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	STATE	DUES	OTHER	DEDUCTIONS	FOR WE
h) (6)	Operator	0	9	7						16	\$ 66.53	\$1,064.40	\$135.71					¢ 425.74	
	O S	s	8	8						16	\$ 44.35	\$ 709.60	\$135.71					\$ 135.71	\$ 1,63
0)(6)	Operator		9	7						16	\$ 66.53	\$1,064.40	\$135.71					2 405.74	
	op N		8	8						16	\$ 44.35	\$ 709.60	\$135.71					\$ 135.71	\$ 1,63
						-													
			34	30	0	0	0	0	0	64	l	\$3,548.00							

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Date _	11/6/201	3										
i, (b) (6)(b) (6)	of Signatory Party)		Payroll Specialis								
	(Name (or Signatory Party)			(Title)							
do hereby	state:											
P# (1) Tha	t I pay or supe	ervise the payment o	f the person	s employed by								
Mersino	Mersino Dewatering, Inc (Contractor or Subcontractor)											
		(Contr	ractor or Sub	contractor)								
Clean Rav	Water Intake (Buil	e-Naval Station Greating or Work)	at Lakes, Illin	o; that during the	payroll period co	ommencing on	the					
	iay of	October ,	2013,	and ending the	3 day of	November	2013 .					
all persons	employed on	said project have b	een paid the	full weekly wages	earned, that no	rebates have						
Mersino De	ewatering Inc.			***************************************		fr	om the full					
that the wa wage deter	ige rates for la	aborers or mechani rporated into the co	cs contained	therein are not le	ess than the ap-	plicable wage i	correct and complete; rates contained in any r or mechanic conform					
with a Stat Labor, or if	e apprentices	ship agency recogni gnized agency exist	ized by the	Bureau of Appren	ticeship and Tr	aining. United	nip program registered States Department of p and Training, United					
(4) That: (a		RINGE BENEFITS A	RE PAID TO	APPROVED PL	ANS, FUNDS, O	R PROGRAM	6					
		referenced pay	roll, paymen	ts of fringe benefit	s as listed in the	e contract have	nic listed in the above been or will be made n Section 4(c) below.					

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH $oxed{oxed}$ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noed in Section 4(c) below. (c) EXCEPTIONS EXCEPTION (CRAFT) **EXPLANATION** REMARKS: NAME AND TITLE

Payroll

TITLE 31 OF THE UNITED STATES CODE.

*U.S. G.P.O. 1997 510 861

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Employment Standards Administation Wage and Hour Division

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NAME OF CONTRACTOR ADDRESS OMB No.: 1215-0149 Mersino Dewatering Inc. 10162 E. Coldwater Rd PAYROLL NO. 5 FOR WEEK ENDING PROJECT AND LOCATION PROJECT OR CONTRACTOR NO. Clean Raw Water Intake 10/27/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (1) (3) (4) DAY AND DATE (9) DEDUCTIONS M W F S S NET WORK WAGES O.R CLASSIFI 21-Oct 22-Oct 23-Oct 24-Oct 25-Oct 26-Oct TOTAL PAID NAME, ADDRESS, AND CATION GROSS WITH-DEDUCTIONS FOR WEEK SOCIAL SECURITY NUMBER TOTAL HOURS WORKED EACH DAY RATE AMOUNT HOLDING OF EMPLOYEE HOURS OF PAY EARNED FICA STATE TAX DUES OTHER Operator WM 0 8 5.5 5 20.5 \$ 66.53 \$1,363.76 \$212.90 \$ 212.90 \$ 2,570.07 S 8 8 8 \$ 44.35 | \$1,419.20 32 Operator WM 8 0 8 \$ 55.28 \$ 442.20 \$ 56.38 56.38 680.62 8 8 \$ 36.85 | \$ 294.80 Operator WM 5 5.5 2 12.5 \$ 66.53 \$ 831.56 \$145.04 \$ 145.04 \$ 1,750.92 8 8 24 \$ 44.35 \$1.064.40 32 27 20 26 105 0 \$5,415.93

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Date 10/30/2013	(b) WHERE FRINGE BENEFITS ARE PAID IN	CASH
(Name of Signatory Party) Payroll Specialist (Title) do hereby state:	indicated on the payroll, an amo	in the above referenced payroll has been paid, as bunt not less than the sum of the applicable basic ant of the required fringe benefits as listed in the on 4(c) below.
P/ (1) That I pay or supervise the payment of the persons employed by		
Mersino Dewatering, Inc.	(c) EXCEPTIONS	
(Contractor or Subcontractor)	EXCEPTION (CRAFT)	EXPLANATION
Clean Raw Water Intake-Naval Station Great Lakes, Illino ; that during the payroll period commencing on the (Building or Work)		
21 day of October , 2013 , and ending the 27 day of October 2013 . all persons employed on said project have been paid the full weekly wages earned, that no rebates have		
Mersino Dewatering Inc. from the full		
	REMARKS:	
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination Incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.		
(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.		
(4) That:		
(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE	(b) (6)
 in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below. 	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION TITLE 31 OF THE UNITED STATES CODE.	STATEMENTS MAY SUBJECT THE CONTRACTOR OR I. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF

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Employment Standards Administation Wage and Hour Division

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

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NAME OF CONTRACTOR П ADDRESS OMB No.: 1215-0149 Mersino Dewatering Inc. 10162 E. Coldwater Rd PAYROLL NO. 4 FOR WEEK ENDING PROJECT AND LOCATION PROJECT OR CONTRACTOR NO. Clean Raw Water Intake 10/20/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (1) (3) (4) DAY AND DATE (9) DEDUCTIONS ST. М Т W Т s S NET WORK WAGES CLASSIFI OR 14-Oct 15-Oct 16-Oct 17-Oct 18-Oct 19-Oct TOTAL PAID 20-Oct NAME, ADDRESS, AND CATION 9 **GROSS** WITH-DEDUCTIONS FOR WEEK SOCIAL SECURITY NUMBER HOURS WORKED EACH DAY TOTAL RATE AMOUNT HOLDING OF EMPLOYEE HOURS OF PAY EARNED FICA STATE OTHER TAX DUES 0 \$ No Activity \$ \$ 0 \$ \$ 0 \$

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Date 10/23/2013	(b) WHERE FRINGE BENEFITS ARE PAID IN CASH
I, (b) (6)(b) (6) (Name of Signatory Party) Payroll Specialist (Title) do hereby state:	Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noed in Section 4(c) below.
P/ (1) That I pay or supervise the payment of the persons employed by	
Mersino Dewatering, Inc on the	(c) EXCEPTIONS
(Contractor or Subcontractor)	EXCEPTION (CRAFT) EXPLANATION
Clean Raw Water Intake-Naval Station Great Lakes, Illino ; that during the payroll period commencing on the (Building or Work)	
14 day of October , 2013 , and ending the 20 day of October 2013 . all persons employed on said project have been paid the full weekly wages earned, that no rebates have	
Mersino Dewatering Incfrom the full	
	REMARKS:
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination Incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.	
(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.	
(4) That:	No Activity
(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE
 in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made 	
to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION, SEE SECTION 1001-OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

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Employment Standards Administation Wage and Hour Division

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

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NAME OF CONTRACTOR V П ADDRESS OMB No.: 1215-0149 Mersino Dewatering Inc. 10162 E. Coldwater Rd PAYROLL NO. 3 FOR WEEK ENDING PROJECT AND LOCATION PROJECT OR CONTRACTOR NO. Clean Raw Water Intake 10/13/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (1) (3) (4) DAY AND DATE (9) DEDUCTIONS ST. Μ W F S S NET WORK WAGES S R CLASSIFI 7-Oct 8-Oct 9-Oct 10-Oct 11-Oct TOTAL PAID 12-Oct 13-Oct NAME, ADDRESS, AND CATION GROSS WITH-DEDUCTIONS FOR WEEK SOCIAL SECURITY NUMBER HOURS WORKED EACH DAY TOTAL RATE AMOUNT HOLDING OF EMPLOYEE HOURS OF PAY EARNED FICA STATE TAX DUES OTHER 0 \$ No Activity \$ 0 \$ 0 \$ \$ 0 \$ \$

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Date	(b) WHERE FRINGE BENEFITS ARE PAID IN CASH Each laborer or mechanic listed in the above referenced payroll has been paid, as
(Name of Signatory Party) (Title) do hereby state:	indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noed in Section 4(c) below.
PJ (1) That I pay or supervise the payment of the persons employed by	() = 0.00
Mersino Dewatering, Inc on the (Contractor or Subcontractor)	(c) EXCEPTIONS EXCEPTION (CRAFT) EXPLANATION
Clean Raw Water Intake-Naval Station Great Lakes, Illino; that during the payroll period commencing on the (Building or Work)	
7 day of October , 2013 , and ending the 13 day of October 2013 . all persons employed on said project have been paid the full weekly wages earned, that no rebates have	
Mersino Dewatering Inc. from the full	
	REMARKS:
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination Incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.	
(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.	
(4) That: (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	No Activity
 in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below. 	NAME AND TITLE (b) (6) Payroll THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

PAYROLL

Employment Standards Administation Wage and Hour Division

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OMB No.: 1215-0149 Mersino Dewatering Inc. 10162 E. Coldwater Rd PAYROLL NO. 2 FOR WEEK ENDING PROJECT AND LOCATION PROJECT OR CONTRACTOR NO. Clean Raw Water Intake 10/6/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (1) (3) (4) DAY AND DATE (7) DEDUCTIONS M W F S S S NET WORK WAGES CLASSIFI O.R 30-Sep 1-Oct 2-Oct 3-Oct 4-0ct TOTAL 5-Oct PAID NAME, ADDRESS, AND CATION GROSS DEDUCTIONS WITH-FOR WEEK SOCIAL SECURITY NUMBER HOURS WORKED EACH DAY TOTAL RATE AMOUNT HOLDING OF EMPLOYEE HOURS OF PAY EARNED FICA TAX STATE DUES OTHER Operator WM 0 0 \$ 66.53 \$ \$ 81.43 81.43 \$ 982.97 s 8 8 8 24 \$ 44.35 \$1,064.40 Operator WM 0 0 \$ 66.53 | \$ \$ 81.43 81.43 \$ 982.97 s 8 8 8 \$ 44.35 \$1,064.40 16 16 16 48 \$2,128.80

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF



Date _	10/9/2013		(b) WHERE FRINGE BENEFITS ARE PAID IN	N CASH				
i, (b) (do hereby s	Payroll Specialist (Name of Signatory Party) state:	(Title)	Each laborer or mechanic listed in the above referenced payroll has been paindicated on the payroll, an amount not less than the sum of the applicable hourly wage rate plus the amount of the required fringe benefits as listed contract, except as noed in Section 4(c) below.					
PF(1) That	I pay or supervise the payment of the persons employed by							
	Dewatering, Inc		(c) EXCEPTIONS					
IVIETSITIO I	(Contractor or Subcontractor)	on the	EXCEPTION (CRAFT)	EXPLANATION				
Clean Raw	Water Intake-Naval Station Great Lakes, Illino; that during the payroll p (Building or Work)	eriod commencing on the						
30 dall persons	ay of <u>September</u> , <u>2013</u> , and ending the <u>6</u> employed on said project have been paid the full weekly wages earned,	day of October 2013 . that no rebates have						
Mersino De	ewatering Inc.	from the full						
			REMARKS:					
wage determ	any payrolls otherwise under this contract required to be submitted for ge rates for laborers or mechanics contained therein are not less than mination Incorporated into the contract; that the classifications set forth to rk he performed.	the applicable wage rates contained in any						
with a State Labor, or if	any apprentices employed in the above period are duly registered in a e apprenticeship agency recognized by the Bureau of Apprenticeship no such recognized agency exists in a State, are registered with the Buartment of Labor.	and Training, United States Department of						
(4) That:			L					
(a)) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FU	NDS, OR PROGRAMS	NAME AND TITLE	(h) (6)				
	 in addition to the basic hourly wage rates paid to eareferenced payroll, payments of fringe benefits as listed to appropriate programs for the benefit of such employ 	ed in the contract have been or will be made	(b) (6)(b) (6)(b) (6) / Payroll THE WILLFUL FALSIFICATION OF ANY OF THE ABOV SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTIC TITLE 31 OF THE UNITED STATES CODE.	E STATEMENTS MAY/SUBJECT THE CONTRACTOR OR ON. SEE SECTION 100 OF TITLE 18 AND SECTION 231 OF				

PAYROLL

Employment Standards Administation Wage and Hour Division

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

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NAME OF CONTRACTOR ADDRESS OMB No.: 1215-0149 Mersino Dewatering Inc. 10162 E. Coldwater Rd PAYROLL NO. 1 FOR WEEK ENDING PROJECT AND LOCATION PROJECT OR CONTRACTOR NO. Clean Raw Water Intake 9/29/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (1) (3) (4) DAY AND DATE (8) DEDUCTIONS ST. s S NET WORK WAGES R CLASSIFI 23-Sep 24-Sep 25-Sep 26-Sep 27-Sep 28-Sep 29-Sep TOTAL PAID NAME, ADDRESS, AND CATION GROSS WITH-DEDUCTIONS FOR WEEK SOCIAL SECURITY NUMBER TOTAL HOURS WORKED EACH DAY RATE AMOUNT HOLDING OF EMPLOYEE HOURS OF PAY EARNED FICA TAX STATE DUES OTHER Operator WM O 4 3 2 11 \$ 66.53 \$ 731.78 \$191.69 \$ 191.69 | \$ 2,314.08 s 8 8 8 8 40 \$ 44.35 \$1,774.00 Operator WM 6 3 2 12 \$ 66.53 \$ 798.30 \$169.64 \$ 169.64 \$ 2,047.86 s 8 8 8 8 32 \$ 44.35 \$1,419.20 12 22 20 95 \$4,723,28

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF

Date10/2/2013	(b) WHERE FRINGE BENEFITS ARE PAID IN CASH
I, (b) (6) (Name of Signatory Party) Payroll Specialist (Title) do hereby state:	 Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noed in Section 4(c) below.
P/ (1) That I pay or supervise the payment of the persons employed by	(c) EXCEPTIONS
Mersino Dewatering, Incon the (Contractor or Subcontractor)	EXCEPTIONS EXPLANATION
Clean Raw Water Intake-Naval Station Great Lakes, Illino ; that during the payroll period commencing on the (Building or Work)	
23 day of September , 2013 , and ending the 29 day of September 2013 . all persons employed on said project have been paid the full weekly wages earned, that no rebates have	
Mersino Dewatering Incfrom the full	
	REMARKS:
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination Incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.	
(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.	
(4) That: (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE (b) (6)(b) (6)
 in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below. 	

PAYROLL

Employment Standards Administation Wage and Hour Division

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

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OMB No.: 1215-0149 NAME OF CONTRACTOR ADDRESS 10162 E. Coldwater Rd Mersino Dewatering Inc. PROJECT OR CONTRACTOR NO. PAYROLL NO. 12 FOR WEEK ENDING PROJECT AND LOCATION Clean Raw Water Intake 12/15/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (1) (3) (4) DAY AND DATE (7) (9) DEDUCTIONS NET S M W ST WAGES WORK OR. CLASSIFI TOTAL PAID 9-Dec 10-Dec 11-Dec 12-Dec 13-Dec 14-Dec 15-Dec DEDUCTIONS FOR WEEK NAME, ADDRESS, AND CATION GROSS WITH-RATE AMOUNT HOLDING SOCIAL SECURITY NUMBER TOTAL HOURS WORKED EACH DAY HOURS OF PAY STATE DUES OTHER OF EMPLOYEE EARNED FICA TAX \$ \$ No Activity 0 \$ \$ 0 \$ \$ 0 \$ \$ 0

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS



Date 12/24/2013	(b) V
(Name of Signatory Party) Payroll Specialist (Title)	
do hereby state:	
P.F.(1) That I pay or supervise the payment of the persons employed by	(c) E
Mersino Dewatering, Incon the	(c) =
Clean Raw Water Intake-Naval Station Great Lakes, Illino ; that during the payroll period commencing on the (Building or Work) 9 day of December . 2013 , and ending the 15 day of December 2013 . all persons employed on said project have been paid the full weekly wages earned, that no rebates have	
Mersino Dewatering Incfrom the full	w
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and compl that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in wage determination Incorporated into the contract; that the classifications set forth therein for each laborer or mechanic confi	any
with the work he performed.	
(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registe with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Departmen Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, Un States Department of Labor.	nt of
(4) That:	No A
(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	
 in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the ab referenced payroll, payments of fringe benefits as listed in the contract have been or will be m to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below 	ade THE W

3	 Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noed in Section 4(c) below.

(c) EXCEPTIONS		
EXCEPTION (CRAFT)	EXPLANATION	
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	AND	
164711796757777		
REMARKS:	Control of the Secretary of the Control of the Secretary	
No Activity		

NAME AND TITLE

(b) (6)(b) (6) / Payroll

WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OF

HE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR UBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION, SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TLE 31 OF THE UNITED STATES CODE.

PAYROLL

Employment Standards Administation Wage and Hour Division

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

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NAME OF CONTRACTOR ADDRESS OMB No.: 1215-0149 [7] 10162 E. Coldwater Rd Mersino Dewatering Inc. PAYROLL NO. 13 PROJECT AND LOCATION PROJECT OR CONTRACTOR NO. FOR WEEK ENDING Clean Raw Water Intake N40083-12-C-3015 12/22/2013 Naval Station Great Lakes, Illinois (1) (3) (4) DAY AND DATE (9) DEDUCTIONS NET S M WORK WAGES OR CLASSIFI TOTAL PAID 16-Dec 17-Dec 18-Dec 19-Dec 20-Dec 21-Dec 22-Dec WITH-DEDUCTIONS FOR WEEK NAME, ADDRESS, AND CATION GROSS O. RATE SOCIAL SECURITY NUMBER TOTAL AMOUNT HOLDING HOURS WORKED EACH DAY STATE DUES OTHER OF EMPLOYEE HOURS OF PAY EARNED FICA TAX 0 \$ No Activity 0 \$ \$ 0 \$ 0 \$ \$ 0

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS



Date _	12/24/2013		(b) WHERE FRINGE BENEFITS ARE PAID IN C	ASH				
t, (b) (6)	(Name of Signatory Party) Payroll Specialist (Title)	Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noed in Section 4(c) below.						
D/ /1) The	t I pay or supervise the payment of the persons employed by							
PF(1) Ina	t pay or supervise the payment of the persons employed by	(c) EXCEPTIONS						
Mersino	Dewatering, Inc (Contractor or Subcontractor)	on the	EXCEPTION (CRAFT)	EXPLANATION				
Clean Rav	v Water Intake-Naval Station Great Lakes, Illino ; that during the payroll period comm (Building or Work)	encing on the						
16 all persons	day of <u>December</u> , <u>2013</u> , and ending the <u>22</u> day of <u>December</u> , <u>2013</u> , and ending the <u>22</u> day of <u>December</u> , employed on said project have been paid the full weekly wages earned, that no reb	ecember 2013 . ates have						
Mersino D	ewatering Inc.	from the full						
			REMARKS:					
that the w wage dete	t any payrolls otherwise under this contract required to be submitted for the above age rates for laborers or mechanics contained therein are not less than the applica remination Incorporated into the contract; that the classifications set forth therein for e ork he performed.	able wage rates contained in any						
with a Sta Labor, or i	t any apprentices employed in the above period are duly registered in a bona fide a ste apprenticeship agency recognized by the Bureau of Apprenticeship and Traini f no such recognized agency exists in a State, are registered with the Bureau of Ap- partment of Labor.	ng, United States Department of	No Activity					
(4) That	-		INO ACCUPIES					
((a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR F	ROGRAMS	NAME AND TITLE	(h) (6)(h) (6)				
	 in addition to the basic hourly wage rates paid to each laborer referenced payroll, payments of fringe benefits as listed in the co to appropriate programs for the benefit of such employees, except 	ntract have been or will be made	(b) (6)(b) (6) (Payroll THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION TITLE 31 OF THE UNITED STATES CODE.	STATEMENTS MAY SUBJECT THE CONTRACTOR OR I. SEE SECTION 1001 OR JUTLE 18 AND SECTION 231 OF				

PAYROLL

Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division

Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

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NAME OF CONTRACTOR OR SUBCONTR		_									ADDRE	rss 7550 Eas	st Melton Roa	d					OMB No.	: 1235-000
Industrial &	Enviro	onmental Services, LLC	2									Gary, Ind	liana 46403-3	3147						01/31/20
PAYROLL NO.		FOR WEEK ENDING										CT AND LOCAT					PROJECT (OR CONTRAC	T NO.	
001			08	9/22/2	2013							n Raw Water al Station Gre	eat Lakes, Illin	nois			N40083-	12-C-3015		
(1)	(2)	(3)			(4) DA	Y AND	DAT	E		(5)	(6)	(7)				(8)			(9)
	NS SN		ST.	M	T	w	Th	F	Sa	Su	1					DED	OUCTIONS			
NAME AND INDIV DUAL DENT FY NG NUMBER	FOL PTIO		r. or	\vdash	17	_	_	_	—	-	ł	! 	GROSS		WITH-		Т	Ι	Т	NET WAGES
(e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	0		OURS						TOTAL HOURS	RATE OF PAY	AMOUNT EARNED	FICA	HOLDING TAX	STATE	401K	OTHER	TOTAL DEDUCTIONS	PAID FOR WEE
		Site Superintendent	0										\$2,580.00	1						
(h) (6)	0		Н		\dashv		_	┝	┢	┢			/	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$2,580.0
(D)(O)			s	12.00	12.00	11.00	8.00	0.00	0.00	0.00	43.00	60 00	\$2,580.00					1		
		Quality Control	0										\$624.00							
(b)(b)	0	Manager	Н		\dashv		_	<u> </u>	⊢	-	\$15	\$159.12	\$289.16	\$67.29	\$62.40	\$0.00	\$577.97	\$1,502.0		
			s	12.00	12.00	0.00	0.00	0.00	0.00	0.00	24.00	26 00	\$2,080.00							
(b) (6)		Site Safety and	0											1						
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3 3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S.Is are contractors (J.S.) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payroll and complete and that each leaferst contractors are designed in the proper Davis-Bacon prevailing wages and fringe heads to the proper that the proper Davis-Bacon prevailing wages and fringe heads to the proper that the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages are proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages are proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages are

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date October 4, 2013			(b) WHERE FRINGE BENEFITS ARE PAID IN CASH							
(b) (6)(b) (6)	Prograr	m Manager	· ·							
(Name of Signatory Party)		(Title)		 Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable 						
do hereby state:			basic hourly wage rate plus the amount of the required fringe benefits as liste							
(1) That I pay or supervise the payment of the	persons employed by			in the contract, except as noted in section 4(c) below.						
Industrial & Environme	. , ,		(c) EXCEPTIONS							
(Contractor or Sub-	·		on the	EXCER	PTION (CRAFT)	EXPLANATION				
Clean Raw Water Intake	; that during the payrol	II period commend	cing on the		- (- /	· · · · · · · · · · · · · · · · · · ·				
(Building or Work)		•	3							
16th day of September , 2013 , and of	ending the 22nd day of _	September	<u>, 2013</u> ,							
all persons employed on said project have been paid been or will be made either directly or indirectly to or		ned, that no reba	tes have							
Industrial & Environmen	tal Services, LLC		from the full							
(Contractor or Sul	bcontractor)		nom the fall							
weekly wages earned by any person and that no de from the full wages earned by any person, other than										
3 (29 C.F.R. Subtitle A), issued by the Secretary of I 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C.	abor under the Copeland A § 3145), and described belo	cct, as amended (· w:	48 Stat. 948,							
				REMARKS:						
(2) That any payrolls otherwise under this cont correct and complete; that the wage rates for labore applicable wage rates contained in any wage determ set forth therein for each laborer or mechanic confor (3) That any apprentices employed in the above program registered with a State apprenticeship ager Training, United States Department of Labor, or if no with the Bureau of Apprenticeship and Training, Unit	rs or mechanics contained ination incorporated into the m with the work he performed period are duly registered in the period are duly registered in the period are duly registered in the period are duly recognized by the Burea of such recognized agency expenses.	therein are not lesse contract; that the ed. n a bona fide apprenticesh xists in a State, ar	es than the e classifications renticeship ip and							
(4) That:						1				
(a) WHERE FRINGE BENEFITS ARE PAI	D TO APPROVED PLANS,	FUNDS, OR PRO	GRAMS	NAME AND TITLE (b) (6)(b) (6)		SIGNATURE				
— in addition to the basic hourly	v wage rates paid to each la	aborer or mechan	nic listed in	Program Manager						
the above referenced payroll have been or will be made to except as noted in section 4(c	, payments of fringe bene to appropriate programs for the	fits as listed in th	ne contract	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.						

PAYROLL

U.S. Wage and Hour Division

Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

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Rev. Dec. 2008

ADDRESS 7550 East Melton Road									OMB No.:	1235-0008											
Industrial & Environmental Services, LLC									Gary, Ind	iana 46403-3	3147						01/31/2015				
PAYROLL NO.	FOR WEEK ENDING								T AND LOCATI					PROJECT (OR CONTRAC	T NO.					
002			09/29/2013				Clean Raw Water Intake Naval Station Great Lakes, Illinois				N40083-12-C-3015										
(1)	(2)	(3)		(4) DAY AND DATE			(5	(5) (6)	(7)	(8) DEDUCTIONS					(9)						
			R ST.	M	T	W	Th	F	Sa	Sa Su										NET	
NAME AND INDIV DUAL DENT FY NG NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER		WORK CLASSIFICATION	OT. 0		24 IOUR	25 S W C	26 DRKE				TO1	TAL JRS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	STATE	401K	OTHER	TOTAL DEDUCTIONS	WAGES PAID FOR WEEK
		Site Superintendent	О	0.00	0.00	0.00	0.00	0.00	0.00	0.0	10			\$1,440.00							
(b) (6)	0		s	0.00	0.00	8.00	8.00	8.00	0.00	0.00	0 24	.00	60 00	\$1,440.00	\$0.00	0 \$0.00	\$0.00	\$0.00	\$0.00		\$1,440.00
C		Site Safety and Health Officer	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0			\$1,392.00	\$0.00 \$0.00	40.00	40.00	00.00	#0.00		¢1 202 00
	0		s	0.00	0.00	8.00	8.00	8.00	0.00	0.00	0 24	.00	58 00			\$0.00	\$0.00	\$0.00		\$1,392.00	
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3 3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date October 4, 2013				(b) WHERE FRINGE BENEFITS ARE PAID IN CASH						
(b) (6)(b) (6)	Prograr	m Manager	_							
(Name of Signatory Party)		(Title)		 Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable 						
do hereby state:			basic hourly wage rate plus the amount of the required fringe benefits as liste in the contract, except as noted in section 4(c) below.							
(1) That I pay or supervise the payment of the	persons employed by					oted in section 4(c) below.				
Industrial & Environme	. , ,			(c) EXCEPTIONS						
(Contractor or Sub-			on the	EXCEF	EXPLANATION					
Clean Raw Water Intake	; that during the payro	II period commend	cing on the		,	· · · · · · · · · · · · · · · · · · ·				
(Building or Work)		•	3							
16th day of September , 2013 , and of	ending the 22nd day of _	September	, <u>2013</u> ,							
all persons employed on said project have been paid been or will be made either directly or indirectly to or		ned, that no reba	tes have							
Industrial & Environmen	tal Services, LLC		from the full							
(Contractor or Sul	bcontractor)		nom the fair							
weekly wages earned by any person and that no de from the full wages earned by any person, other than										
3 (29 C.F.R. Subtitle A), issued by the Secretary of I 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C.	abor under the Copeland A § 3145), and described belo	act, as amended (· w:	48 Stat. 948,							
				REMARKS:						
(2) That any payrolls otherwise under this cont correct and complete; that the wage rates for labore applicable wage rates contained in any wage determ set forth therein for each laborer or mechanic confor (3) That any apprentices employed in the above program registered with a State apprenticeship ager Training, United States Department of Labor, or if no with the Bureau of Apprenticeship and Training, Unit	rs or mechanics contained ination incorporated into the m with the work he perform period are duly registered incy recognized by the Bureas such recognized agency expenses.	therein are not lesse contract; that the ed. n a bona fide apprenticesh xists in a State, ar	es than the e classifications renticeship ip and							
(4) That:										
(a) WHERE FRINGE BENEFITS ARE PAI	D TO APPROVED PLANS,	FUNDS, OR PRO	GRAMS	NAME AND TITLE (b) (6)(b) (6)		SIGNATURE				
— in addition to the basic hourly	v wage rates paid to each la	aborer or mechan	nic listed in	Program Manager						
the above referenced payroll have been or will be made to except as noted in section 4(c	, payments of fringe beneficially appropriate programs for the	fits as listed in th	ne contract	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.						

PAYROLL

U.S. Wage and Hour Division

Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

Rev. Dec. 2008

ADDRESS 7555 5 . M. V. P. P. J. L. 1005 0000

NAME OF CONTRACTOR OR SUBCONTRA		_									ADDRE	7550 Eas	st Melton Roa	d					OMB No.	: 1235-0008 01/31/2015
	Enviro	nmental Services, LL											liana 46403-3	3147						01/31/2013
PAYROLL NO.		FOR WEEK ENDING										CT AND LOCAT					PROJECT	OR CONTRAC	I NO.	
003			1(0/06/2							Nava	al Station Gre	eat Lakes, Illin	ois			N40083-	12-C-3015		
(1)	(2)	(3)			(4	I) DAY	Y AND	DAT	E		(5)	(6)	(7)				(8) UCTIONS			(9)
	LDING		R ST.	M	T	W	Th	F	Sa	Su						DED	UCTIONS			NET
NAME AND INDIV DUAL DENT FY NG NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. 0	30	1	2 S WO	3	4) EAC	5 `H DA	6	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	STATE	401K	OTHER	TOTAL DEDUCTIONS	WAGES PAID FOR WEEK
NOMBERY OF WORKER	2/2	Site Superintendent	0			0.00			0.00		HOOKO	OFTAI	\$2,400.00	TIOA	TAX			OTTLER	BEBOOTIONS	TORWELK
(b) (6)	0		s	8.00	8.00	8.00	8.00	8.00	0.00	0.00	40.00	60 00	-	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$2,400.00
			3	8.00	8.00	8.00	8.00	8.00	0.00	0.00	40.00	00 00	\$2,400.00							
	0	Quality Control Manager	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00			\$832.00	015010	#	ф. г. э о	4.52.40	#0.00	4555.05	A4 502 02
	0	Manager	S	8.00	0.00	8.00	8.00	8.00	0.00	0.00	32.00	26 00	\$2,080.00	\$159.12	\$289.16	\$67.29	\$62.40	\$0.00	\$577.97	\$1,502.03
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3 3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (Dot) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "statement of Compliance" indicating that the payroll and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date October 6, 2013				(b) WHERE FRI	INGE BENEFITS ARE PAID	IN CASH
(b) (6)(b) (6)	Progran	n Manager		_		
(Name of Signatory Party)		(Title)		□ -		listed in the above referenced payroll has been paid, I, an amount not less than the sum of the applicable
do hereby state:					basic hourly wage rate plu	is the amount of the required fringe benefits as listed
(1) That I pay or supervise the payment of the	persons employed by				•	noted in section 4(c) below.
Industrial & Environme				(c) EXCEPTION	18	
(Contractor or Sub	· · · · · · · · · · · · · · · · · · ·		on the	EXCE	PTION (CRAFT)	EXPLANATION
Clean Raw Water Intake	; that during the payroll	period commen	cing on the			
(Building or Work) 30th day of September 2013 and	ending the 6th day of	October	2013			
all persons employed on said project have been paid been or will be made either directly or indirectly to or	I the full weekly wages earn	ed, that no reba	tes have			
Industrial & Environmer	tal Services, LLC		from the full			
(Contractor or Su	bcontractor)		nom the full			
weekly wages earned by any person and that no de from the full wages earned by any person, other tha						
63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.Ś.C.	§ 3145), and described belov	w:		REMARKS:		
				TALIII II II II II		
(2) That any payrolls otherwise under this confect and complete; that the wage rates for labore applicable wage rates contained in any wage determ set forth therein for each laborer or mechanic conformation (3) That any apprentices employed in the above program registered with a State apprenticeship ager Training, United States Department of Labor, or if no with the Bureau of Apprenticeship and Training, United States	rs or mechanics contained t ination incorporated into the m with the work he performe period are duly registered in tory recognized by the Bureat o such recognized agency ex	herein are not le contract; that the d. a a bona fide app u of Apprenticest ists in a State, a	ss than the e classifications prenticeship nip and			
(4) That:						1
(a) WHERE FRINGE BENEFITS ARE PA	D TO APPROVED PLANS, I	FUNDS, OR PRO	OGRAMS	NAME AND TITLE (b) (6)(b) (6)		SIGNATURE
 in addition to the basic hourl 	wage rates paid to each la	borer or mecha	nic listed in	Program Manager		
the above referenced payrol have been or will be made to except as noted in section 4(, payments of fringe bene fi appropriate programs for the	ts as listed in t	he contract		CIV L OR CRIM NAL PROSECUTIO	STATEMENTS MAY SUBJECT THE CONTRACTOR OR N. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

PAYROLL

Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division

Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

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NAME OF CONTRACTOR	OR SUBCONTRA			_								ADDRE	7550 Eas	t Melton Roa	d 24.47					OMB No.	: 1235-000 01/31/201
	Industrial & I	Enviro	nmental Services, LLC											iana 46403-3	0147			DDO IFOT O	OR CONTRAC		01/31/201
PAYROLL NO.			FOR WEEK ENDING		0/40/	2040							CT AND LOCATI n Raw Water							I NO.	
004				10	0/13/	2013	5							at Lakes, Illin	ois			N40083-	12-C-3015		
(1)		(2)	(3)			(4) DA	y and	DAT	ſΕ		(5)	(6)	(7)				(0)			(9)
		NG		H	М	т	117	Th	Е	Sa	Su	1					DED	(8) UCTIONS			
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(e.g., LAST FOUR DIGITS OF SOC	CIAL SECURITY	O. OF ATHI- XEMF	WORK	OT.	7	8	9			12		TOTAL	RATE	AMOUNT	F10.4	HOLDING	STATE	401K	OTUED.	TOTAL	PAID
NUMBER) OF WORKE		Ž≶W	CLASSIFICATION	╁				RKE	Т	Т	Т	HOURS	OF PAY	\$2,400.00	FICA	TAX			OTHER	DEDUCTIONS	FOR WEE
/1- \ /0			Site Superintendent	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00			12,100.00	***	***		** **	***		** *** *
(n)		0		g	• 00	• 00	e nn	9.00		0.00	0.00	40.00	60 00	1 /	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$2,400.0
(b) (6)				Ľ	8.00	8.00	8.00	8.00	8.00	0.00	0.00	40.00	00 00	\$2,400.00							
			Quality Control	o	0.00	0.00	0.00	0.00	0.00	0.00	0.00			\$1,040.00							
		0	Manager	\vdash	Н			\vdash	\vdash	⊢	+			/	\$159.12	\$289.16	\$67.29	\$62.40	\$0.00	\$577.97	\$1,502.0
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3 3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S.Is are contractors (J.S.) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payroll and complete and that each leaferst contractors are designed in the proper Davis-Bacon prevailing wages and fringe heads to the proper that the proper Davis-Bacon prevailing wages and fringe heads to the proper that the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages are proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages are proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages are

Public Burden Statement

Date October 13, 2013				(b) WHERE FRI	NGE BENEFITS ARE PAID	IN CASH
(b) (6)(b) (6)	Program	n Manager				
(Name of Signatory Party)		(Title)		□ -		listed in the above referenced payroll has been paid, I, an amount not less than the sum of the applicable
do hereby state:					basic hourly wage rate plu	is the amount of the required fringe benefits as listed
(1) That I pay or supervise the payment of the	persons employed by				•	noted in section 4(c) below.
Industrial & Environme			41	(c) EXCEPTION	IS	
(Contractor or Subo	· ·		on the	EXCEF	PTION (CRAFT)	EXPLANATION
Clean Raw Water Intake	; that during the payroll	period commen	cing on the			
(Building or Work)	404	0.11	0040			
	ending the <u>13th</u> day of _	October	_, _2013_,	-		
all persons employed on said project have been paid been or will be made either directly or indirectly to or		ed, that no reba	ites have			
Industrial & Environmen	tal Services, LLC		from the full			
(Contractor or Sul	ocontractor)		nom are ran			
weekly wages earned by any person and that no de from the full wages earned by any person, other than						
63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.Ś.C. §	§ 3145), and described belov	v:		REMARKS:		
(2) That any payrolls otherwise under this cont correct and complete; that the wage rates for labore applicable wage rates contained in any wage determ set forth therein for each laborer or mechanic confor (3) That any apprentices employed in the above program registered with a State apprenticeship ager Training, United States Department of Labor, or if no with the Bureau of Apprenticeship and Training, Unit	rs or mechanics contained the ination incorporated into the m with the work he performe period are duly registered in cy recognized by the Bureau such recognized agency ex	herein are not le contract; that the d. a bona fide app of Apprenticeshists in a State, a	ss than the e classifications prenticeship nip and			
(4) That:						Lavarra
(a) WHERE FRINGE BENEFITS ARE PAI	D TO APPROVED PLANS, F	FUNDS, OR PRO	OGRAMS	NAME AND TITLE (b) (6)(b) (6)		SIGNATURE
 in addition to the basic hourly 	wage rates paid to each la	borer or mecha	nic listed in	Program Manager		
the above referenced payroll have been or will be made to except as noted in section 4(o	, payments of fringe bene fi appropriate programs for the	ts as listed in t	he contract		IV L OR CRIM NAL PROSECUTIO	STATEMENTS MAY SUBJECT THE CONTRACTOR OR N. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

U.S. Department of Labor Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



Rev. Dec. 2008

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NAME OF CONTRACTOR OR SUBCONTRACTION Industrial &		vironmental Services, LLC									ADDF	RES	S 7550 Eas Gary, Indi	t Melton Road iana 46403-3	d 147					OMB No.: Expires:	: 1235-0008 01/31/2015
PAYROLL NO. 004		FOR WEEK ENDING	;	0/20	/2013	3					Cle	an	T AND LOCATI	Intake	-:-				OR CONTRAC 12-C-3015		
(1)	(2)	(3)					Y ANE	1		1	(5)		(6)	at Lakes, Illin	OIS		DEDI	(8) UCTIONS			(9)
NAME AND INDIV DUAL DENT FY NG NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY	NO. OF WITHHOLDING EXEMPTIONS	WORK	OT. OR ST	14	15	W 16	Th 17	18		20	TOTA		RATE	GROSS AMOUNT		WITH- HOLDING	STATE	401K		TOTAL	NET WAGES PAID
NUMBER) OF WORKER		CLASSIFICATION Site Superintendent	0		0.00					0.00	HOUR	(S	OF PAY	\$2,400.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	DEDUCTIONS	\$2,400.00
	0		s	8.00	8.00	8.00	8.00	8.00	0.00	0.00	40.0	0	60 00	\$2,400.00	Ψ0.00	ψ0.00	ψ0.00	\$0.00	Ψ0.00		\$2,400.00
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3 3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date October 13, 2013				(b) WHERE FRI	INGE BENEFITS ARE PAID	IN CASH
(b) (6)(b) (6)	Program	n Manager		_		
(Name of Signatory Party)		(Title)		□ -		listed in the above referenced payroll has been paid, I, an amount not less than the sum of the applicable
do hereby state:					basic hourly wage rate plu	is the amount of the required fringe benefits as listed
(1) That I pay or supervise the payment of the pe	ersons employed by				•	noted in section 4(c) below.
Industrial & Environmen			41	(c) EXCEPTION	IS	
(Contractor or Subco			on the	EXCE	PTION (CRAFT)	EXPLANATION
Clean Raw Water Intake	; that during the payroll	period commen	cing on the			
(Building or Work)	404	0	0040			
	iding the 13th day of _	October	_, _2013_,	-		
all persons employed on said project have been paid t been or will be made either directly or indirectly to or or		ed, that no reba	ites have			
Industrial & Environmenta	al Services, LLC		from the full			
(Contractor or Subo	contractor)		nom are ran			
weekly wages earned by any person and that no ded from the full wages earned by any person, other than						
63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.Ś.C. §	3145), and described belov	v:		REMARKS:		
				TALIII II II II II		
(2) That any payrolls otherwise under this contract correct and complete; that the wage rates for laborers applicable wage rates contained in any wage determines to forth therein for each laborer or mechanic conform. (3) That any apprentices employed in the above program registered with a State apprenticeship agency Training, United States Department of Labor, or if no swith the Bureau of Apprenticeship and Training, United	or mechanics contained the ation incorporated into the with the work he performe eriod are duly registered in y recognized by the Bureausuch recognized agency ex	nerein are not le contract; that the d. a bona fide app of Apprenticeshists in a State, a	ss than the e classifications prenticeship nip and			
(4) That:						
(a) WHERE FRINGE BENEFITS ARE PAID	TO APPROVED PLANS, F	FUNDS, OR PRO	OGRAMS	NAME AND TITLE (b) (6)(b) (6)		SIGNATURE
 in addition to the basic hourly visited. 	wage rates paid to each la	borer or mecha	nic listed in	Program Manager		
the above referenced payroll, have been or will be made to a except as noted in section 4(c)	payments of fringe benefit opropriate programs for the	ts as listed in t	he contract		IV L OR CRIM NAL PROSECUTION	STATEMENTS MAY SUBJECT THE CONTRACTOR OR N. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

PAYROLL

Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division
Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCO	NTRACTOR		- 1-																Nev. Dec	
		□ onmental Services, LL0	C								ADDITE	7550 Eas Garv. Ind	t Melton Road iana 46403-3	d 3147					OMB No. Expires:	: 1235-000 01/31/201
PAYROLL NO. 006	ar & Erivin	FOR WEEK ENDING	3	0/27/2	013						Clea	CT AND LOCATI	ION					DR CONTRAC 12-C-3015		
(1)	(2) SNO SNO	(3)	ST.	М			Y AND		_	Su	(5)	(6)	(7)			DED	(8) UCTIONS			(9) NET
NAME AND INDIV DUAL DENT FY NG NUMBE (e.g., LAST FOUR DIGITS OF SOCIAL SECURIT NUMBER) OF WORKER		WORK CLASSIFICATION	OT. OF				24 RKED				TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	STATE	401K	OTHER	TOTAL DEDUCTIONS	WAGES PAID
(h) (6)	0	Site Superintendent	0	0.00 8.00	\dashv	\dashv		_	┢	0.00		60 00	\$2,400.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$2,400.0
(D)		Quality Control	0	0.00	\dashv	_				\vdash	40.00	0000	\$2,400.00 \$1,040.00							
	0	Manager	s	8.00	8.00	8.00	8.00	8.00	0.00	0.00	40.00	26 00	\$2,080.00	\$159.12	\$289.16	\$67.29	\$62.40	\$0.00	\$577.97	\$1,502.03
			0		4															
			o	H	\dashv	-			\vdash											
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3 3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S.Is are contractors (J.S.) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payroll and complete and that each leaferst contractors are designed in the proper Davis-Bacon prevailing wages and fringe heads to the proper that the proper Davis-Bacon prevailing wages and fringe heads to the proper that the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages are proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages are proper Davis-Bacon prevailing wages and fringe heads to the proper Davis-Bacon prevailing wages are

Public Burden Statement

Date October 13, 2013				(b) WHERE FRI	NGE BENEFITS ARE PAID	IN CASH
(b) (6)(b) (6)	Program	n Manager				
(Name of Signatory Party)		(Title)		□ -		listed in the above referenced payroll has been paid, I, an amount not less than the sum of the applicable
do hereby state:					basic hourly wage rate plu	is the amount of the required fringe benefits as listed
(1) That I pay or supervise the payment of the	persons employed by				•	noted in section 4(c) below.
Industrial & Environme			41	(c) EXCEPTION	IS	
(Contractor or Subo	· ·		on the	EXCEF	PTION (CRAFT)	EXPLANATION
Clean Raw Water Intake	; that during the payroll	period commen	cing on the			
(Building or Work)	404	0.11	0040			
	ending the <u>13th</u> day of _	October	_, _2013_,	-		
all persons employed on said project have been paid been or will be made either directly or indirectly to or		ed, that no reba	ites have			
Industrial & Environmen	tal Services, LLC		from the full			
(Contractor or Sul	ocontractor)		nom are ran			
weekly wages earned by any person and that no de from the full wages earned by any person, other than						
63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.Ś.C. §	§ 3145), and described belov	v:		REMARKS:		
(2) That any payrolls otherwise under this cont correct and complete; that the wage rates for labore applicable wage rates contained in any wage determ set forth therein for each laborer or mechanic confor (3) That any apprentices employed in the above program registered with a State apprenticeship ager Training, United States Department of Labor, or if no with the Bureau of Apprenticeship and Training, Unit	rs or mechanics contained the ination incorporated into the m with the work he performe period are duly registered in cy recognized by the Bureau such recognized agency ex	herein are not le contract; that the d. a bona fide app of Apprenticeshists in a State, a	ss than the e classifications prenticeship nip and			
(4) That:						Lavarra
(a) WHERE FRINGE BENEFITS ARE PAI	D TO APPROVED PLANS, F	FUNDS, OR PRO	OGRAMS	NAME AND TITLE (b) (6)(b) (6)		SIGNATURE
 in addition to the basic hourly 	wage rates paid to each la	borer or mecha	nic listed in	Program Manager		
the above referenced payroll have been or will be made to except as noted in section 4(o	, payments of fringe bene fi appropriate programs for the	ts as listed in t	he contract		IV L OR CRIM NAL PROSECUTIO	STATEMENTS MAY SUBJECT THE CONTRACTOR OR N. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

OR SUBCONTRACTOR TO

Wage and Hour Division

NAME OF CONTRACTOR [7]

PAYROLL



(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

ADDRESS

NAME OF CONTRACTOR OR SUBCONT		Diving, Inc.	200704								ADDRE	362 Blac Painesvil	kbrook Road lle, Ohio 4407	7					OMB No. Expires:	1235-0008 01/31/2015
PAYROLL NO.		FOR WEEK ENDIN		1/24/	2013	3	7/2				Clea	CT AND LOCAT n Raw Water al Station Gre		iois				OR CONTRAC 12-C-3015		
(1)	CDING (2)	(3)	R ST.	M	T		Th		Sa	Su	(5)	(6)	(7)			DED	(8) DUCTIONS			(9) NET
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. OR			20 S WC	21 ORKED		23 CH DAY		TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	STATE	COUNTY	OTHER	TOTAL DEDUCTIONS	WAGES PAID
(h) (6)	2	ROV Operator		0.00				-		0.00	5.50	\$67.65	\$1,093.68	\$102.03	\$83.67	\$30.99	\$0.00	\$0.00	\$216.69	\$876.99
(D)	++	Laborer	0	0.00	5.50	0.00	8.00	0,00	0.00	0.00	16.00 5.50	\$54.30	\$877.85						-	
	4		s		8.00		8.00				16.00			\$47.74	\$67.16	\$24.70			\$139.60	\$738.25
			0																	
	-		s										/							
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "turnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date December 13, 2013		(b) WHERE FRINGE BENEFITS ARE PAID IN	CASH
(b) (6)(b) (6)	President	(U) WHERE FRINGE BENEFITS ARE FAID II	VOASH
(Name of Signatory Party)	(Title)		sted in the above referenced payroll has been paid,
do hereby state:	(Title)		an amount not less than the sum of the applicable the amount of the required fringe benefits as listed
0.50.000 40.000 5 0.000 50.00		in the contract, except as no	oted in section 4(c) below.
(1) That I pay or supervise the payment of the pe	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	(c) EXCEPTIONS	
Lake Erie Divi	on the		
(Contractor or Subco	70 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	EXCEPTION (CRAFT)	EXPLANATION
Clean Raw Water Intake Project (Building or Work)	; that during the payroll period commencing on the		
18th day of November, 2013, and en	diag the 24th day of November 2013		
all persons employed on said project have been paid the been or will be made either directly or indirectly to or or	ne full weekly wages earned, that no rebates have		
Lake Erie Diving	g, Inc. from the full		
(Contractor or Subc			
weekly wages earned by any person and that no dedu	actions have been made either directly or indirectly sermissible deductions as defined in Regulations. Part		
3 (29 C.F.R. Subtitle A), issued by the Secretary of Lal 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3	bor under the Copeland Act, as amended (48 Stat. 948, 8145), and described below:		
		REMARKS:	<u> </u>
(O) That are remained at the contract of the c		Fringe Benefits Paid:	
correct and complete; that the wage rates for laborers	or required to be submitted for the above period are or mechanics contained therein are not less than the	Patrick Murphy: 21.5 Hours @ \$27.10/Hour = \$5	500 CE
	ation incorporated into the contract; that the classifications	Edward O'Leary 21.5 Hours @ \$27.10/Hour = \$4	
(3) That any apprentices employed in the above pe	eriod are duly registered in a bona fide apprenticeship		
program registered with a State apprenticeship agency	recognized by the Bureau of Apprenticeship and		
with the Bureau of Apprenticeship and Training, United	uch recognized agency exists in a State, are registered I States Department of Labor.		
	Telephone (1999)		
(4) That: (a) WHERE FRINGE BENEFITS ARE PAID	TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE	// / / / / / / / / / / / / / / / / / / /
[7]		(b) (6)(b) (6)	(D)(6)(D)(6)
- in addition to the basic nouny v	vage rates paid to each laborer or mechanic listed in payments of fringe bene fits as listed in the contract	President	ATEMENTS MAY SUBJECT THE CONTRACTOR OF
	propriate programs for the benefit of such employees,	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE ST. SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. 31 OF THE UNITED STATES CODE.	ATEMENTS MAY SUBJECT THE CONTRACTOR OR SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

Wage and Hour Division

PAYROLL



(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm) Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCON	_	Contractors, Inc			-				ADDR	ESS 740 Twi	n Rail Dr IL 60447	·					OMB No	.: 1235-00 01/31/20
PAYROLL NO, 005		FOR WEEK ENDIN		20/201					Clea	ECT AND LOCA	TION	nois				OR CONTRAC	T NO.	01/31/20
(1) NAME AND INDIMIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY	NO, OF WITHHOLDING (3) EXEMPTIONS	(3)	15	M T	-	T 17	F	S S	(5)	(6)	(7) GROSS		WITH-	Τ	(8) DUCTIONS		·-	(9) NET
NUMBER) OF WORKER	S S S	CLASSIFICATION	l° E			!!	EACH		TOTAL HOURS		AMOUNT EARNED	FICA	HÖLDING TAX	State	County	OTHER	TOTAL DEDUCTIONS	WAGES PAID FOR WEEK
(b) (6)	3	Operating Enginners FLT Class 1	o s *	.00 2.00	x.00	2.00 8.00	X.00		2.00 34.00	\$76,95	\$1,898.10	\$196.28	\$388.68	\$85.27	\$12.83	\$64.25	\$747.31	\$2,234.7
(b) (6)	8	Operating Enginners FLT Class 1	O .	00 2.00	N.00	2,00	8.00		2.00	\$76.95	\$1,898.10	\$160.76	\$184,12	\$71.45	\$65.78	\$49.30	\$531,41	\$2,001.6
(b) (6)	1	Operating Enginners FLT Class 1	0			2.00			6.00		\$2,533.10 \$2,141.40	\$169,63	\$459.05	\$74.74	\$69,40	\$ 53.54	\$00C2C	\$1,815.0
(b) (6)	2	Operating Enginners	S 8.	06 2.00	X.00	2.00	8.00		34.00 2.00	^{49.80} \$76.95	\$2,641,40 \$1,898.10				307.40	\$35,54	\$826.36	\$1,013.0
(h) (6)	1	FLT Class 1 Operating	S st	2.00	¥.00	\dashv	K.00		34.00		\$2,395,10 \$1,898,10	\$150.21	\$366.96	\$98.18		\$49,18	\$664.53	\$1,730.5
(b) (c)	1	Enginners FLT Class 1	S 8.0	2.00	8,00	8.00	5.00		2.00 34.00	\$76.95	\$2,395,10	\$150.21	\$387.96	\$66.11	\$61.46	\$49.18	\$714.92	\$1,680,1
(b) (d)	1	Operating Enginners FLT Class 1	s		-	2.00 x.00	.00		2.00	\$76.95	\$666.90	\$141.54	\$356.23	\$90.54		\$47.31	\$635.62	\$1,447.7
(D) (b)	0	Operating Engineers FLT Class 1	5			2.00		+	2.00	\$74.70	\$2,083.40 \$647.40	\$145.36	\$391.21	\$95.01		\$48.37	\$679.95	\$1,646.1
W. Sin			0			×.00 2	.00		10.0(49.80	\$2,326.10						30.75,3	***************************************

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C,F,R, §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "turnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (POL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date10/25/2013				
(b) (6)	Office Manager	(b) WHERE FR	INGE BENEFITS ARE PAID	IN CASH
(Name of Signatory Party)	(Title)	<u> </u>	Each laborer or mechanic	listed in the above referenced payroll has been paid,
do hereby state:	(,		basic hourly wage rate plu	I, an amount not less than the sum of the applicable is the amount of the required fringe benefits as listed
(1) That I pay or supervise the payment of the persons	employed by		in the contract, except as	noted in section 4(c) below.
Lindahl Marine Contrac	tors, inc	(c) EXCEPTION	ıs	
(Contractor or Subcontrac	tor) on the	EXCER	PTION (CRAFT)	EXPLANATION
Naval Station Great Lakes, Illinois	hat during the payroll period commencing on the			
(Building or Work) 14 day of October 2013 and ending the state of the	the 20 day of Ocotober 2013			
all persons employed on said project have been paid the full been or will be made either directly or indirectly to or on beh	weekly wages earned, that no rebates have alf of said			
Lindahl Marine Contracto	rs, Inc from the full	11-11-11-11-11-11-11-11-11-11-11-11-11-		
(Contractor or Subcontra	ctor)		NATO. WALL.	
weekly wages earned by any person and that no deduction from the full wages earned by any person, other than permis 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor ur 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145),	ssible deductions as defined in Regulations, Part			

	728			
	775 de			
	The state of the s			
		REMARKS:		
(2) That any payrolls otherwise under this contract requested and complete; that the wage rates for laborers or me applicable wage rates contained in any wage determination is set forth therein for each laborer or mechanic conform with the contract of	echanics contained therein are not less than the incorporated into the contract; that the classifications he work he performed.			
(3) That any apprentices employed in the above period a program registered with a State apprenticeship agency record Training, United States Department of Labor, or if no such re with the Bureau of Apprenticeship and Training, United State	gnized by the Bureau of Apprenticeship and			
(4) That:(a) WHERE FRINGE BENEFITS ARE PAID TO A				
[7]		NAME AND TITLE (b) (6)(b) (6)		(h) (6)
 in addition to the basic hourly wage r 	ates paid to each laborer or mechanic listed in ents of fringe benefits as listed in the contract	Office Manager		
have been or will be made to appropri except as noted in section 4(c) below.	ate programs for the benefit of such amployees	THE WILLFUL FALSIFICATION TO CITY OF THE UNITED STATE	ATION OF ANY OF THE ABOVE S' VIL OR CRIMINAL PROSECUTION ES CODE,	TATE I. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

Wage and Hour Division

PAYROLL



(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCONTR	ACTOR	×								ADDRE	SS 740 Twin	Rail Dr		***************************************					: 1235-0008
Lindah	l Marin	e Contractors, Inc.									Minooka	IL 60447						Expires:	01/31/2015
PAYROLL NO. 001		FOR WEEK ENDIN		9/22	2013					Clea	PROJECT AND LOCATION PROJECT OR CONTRACT NO. Clean Raw Water Intake Naval Station Great Lakes, Illinois N40083-12-C-3015								
(1)	DEIG SNS	(3)	tsr.	М		AY ANI	F	7	s	(5)	(6)	(7)	i.		DED	(8) UCTIONS			(9)
NAME AND INDMIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO, OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	oT.OF	16	17 18 HOURS W			21 CH DAY	22	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	State	County	OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK
(b) (6)	3	Operating Enginners FLT Class 1	o s	<u> </u>		_	8,00			8.00	\$76.95	\$410.40	\$101.35	\$123.86	\$43.08	\$6.62	\$26.46	\$301,37	\$985.03
(b) (c)	8	Operating Enginners	0	-						0.00	\$76.95	\$1,286.40							
(D)	ļ°.	FLT Class 1	s				8.00			8.00	\$1,30	\$1,583.40 \$398.40	\$104.94	\$74.66	\$46.64	\$42.94	\$26.16	\$295.34	\$1,288,06
(b) (6)	1	Operating Enginners FLT Class 1	o s	ļ		+	8.00			8.00	\$74.70		\$94.88	\$202.43	\$41.51	\$38.82	\$24.02	\$401.66	\$800.14
		M	٥									\$1,201.80							
(b) (6)			\$																
	1	Operating Enginners FLT Class 1	o s			-	8.00			0.00	\$74.70	\$398.40	\$31.63	\$10.40	\$20.68		\$10.36	\$73.07	\$325.33
,			0	-			18.00			8.00	49.80	\$398,40			- III NILU		**************************************		
			s												***************************************				
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			0			-	_	H		•		\vdash							
			s				T												

While completion of Form WH-347 is optional, it is mandatory for covered contractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the precoding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Becon prevailing wage rate for the work performed, DOL and federal contracting agencies receiving this information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date 09/30/2013			
(b) (6)	Office Manager	(b) WHERE FRINGE BENEFITS ARE PAID II	N CASH
i, (b) (c)	Office Manager	= Each laborer or mechanic li	sted in the above referenced payroll has been paid,
(Name of Signatory Party) do hereby state:	(Title)	as indicated on the payroll,	an amount not less than the sum of the applicable the amount of the required fringe benefits as listed
(1) That I pay or supervise the payment of	the persons employed by	in the contract, except as no	oted in Section 4(c) below.
,, ,, ,	- Contractors Inc	(c) EXCEPTIONS	
(Contractor or	on the	EXCEPTION (CRAFT)	EXPLANATION
Naval Station Great Lakes, Illinois	; that during the payroll period commencing on the		
(Building or Work)	00 00010010 0040		
16	and ending the 22 day of September 2013		
all persons employed on said project have been been or will be made either directly or indirectly t	paid the full weekly wages earned, that no rebates have to or on behalf of said		
Lindahl Marine	Contractors, Inc from the full		
(Contractor or	Subcontractor)		
from the full wages earned by any person, other	o deductions have been made either directly or indirectly than permissible deductions as defined in Regulations, Part of Labor under the Copeland Act, as amended (48 Stat. 948, .C. § 3145), and described below:		
	THE RESIDENCE OF THE PARTICULAR OF THE PARTICULA		
	We many		
		REMARKS:	
correct and complete; that the wage rates for lal	contract required to be submitted for the above period are corers or mechanics contained therein are not less than the termination incorporated into the contract; that the classifications inform with the work he performed.		
program registered with a State apprenticeship a	ove period are duly registered in a bona fide apprenticeship agency recognized by the Bureau of Apprenticeship and if no such recognized agency exists in a State, are registered United States Department of Labor.		
(4) That:			
	PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE	SIGNATURE
— in addition to the basic h	ourly wage rates paid to each laborer or mechanic listed in	Office Manager	(b) (6)(b) (6)
	yroll, payments of fringe benefits as listed in the contract to appropriate programs for the benefit of such employees, 14(c) below.	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE ST SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. 31 OF THE UNITED STATES CODE.	ATEMENTS MAY SUBJECT THE CONTRACTOR OR SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

except as noted in section 4(c) below.

Wage and Hour Division

PAYROLL



(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. Rev. Dec. 2008 NAME OF CONTRACTOR OR SUBCONTRACTOR X ADDRESS 740 Twin Rail Dr OMB No.: 1235-0008 Lindahl Marine Contractors, Inc. Minooka IL 60447 Expires: 01/31/2015 PAYROLL NO. FOR WEEK ENDING PROJECT AND LOCATION PROJECT OR CONTRACT NO. 002 Clean Raw Water Intake 09/29/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (1) (2)(3)(4) DAY AND DATE (6) (9) (8) DEDUCTIONS M W T F S S NAME AND INDIVIDUAL IDENTIFYING NUMBER NET GROSS WITH-23 24 25 26 27 28 WAGES 29 (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY WORK State County TOTAL RATE AMOUNT HOLDING TOTAL PAID NUMBER) OF WORKER CLASSIFICATION HOURS OF PAY EARNED FICA TAX OTHER DEDUCTIONS FOR WEEK \$1,846,80 Operating 0,50 1.50 2.00 4.00 \$76.95 Enginners 3 \$169.18 \$300.11 \$73.23 \$11.06 \$55.57 \$609.15 \$1,829.65 FLT Class 1 8.00 K.00 8.00 30.00 51.30 \$2,438.80 \$1,539.00 Operating 0,50 1.50 2.00 4.00 \$76.95 Enginners 8 \$166.48 \$197.56 \$73.99 \$68.12 \$54.88 \$561.03 \$2,545,97 FLT Class 1 8.00 8.00 51,30 K.OD 24.00\$3,107.00 \$1,539.00 Operating 0.50 1.50 2,00 4.00 \$76.95 Enginners 1 \$140.31 \$351.78 \$61.71 \$57.41 \$46.13 \$657.34 \$1,461.87 FLT Class 1 ×.00 1,00 NJOO. 24.00 51.30 \$2,119.21 \$1,494.00 Operating 0.50 1.50 2.00 4.00 \$74.70 Enginners 2 \$211.72 \$592.10 \$138.38 \$69,33 \$1.011.53 \$2,152,50 FLT Class 1 8.00 8.00 **K.**00 24.00 49.80 \$3,164.03 \$1,539.00. Operating 2,00 0.50 1,50 \$76,95 4.00 1 Enginners \$195,47 \$404.78 \$127,75 \$64.55 \$792.55 \$1,985.33 FLT Class 1 K,00 H.00 8.00 24.00 \$1,30 \$2,777.88

While completion of Form WH-347 is optional, it is mandatory for covered confractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Coppliand Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the proceeding week." U.S. Department of Labor (DCL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits,

Public Burden Statement

Date10/01/2013 Office Ma	nager	(b) WHERE FRINGE BENEFITS ARE PAID	IN CASH
(Name of Signatory Party)	Title)	as indicated on the payroll	listed in the above referenced payroll has been paid, , an amount not less than the sum of the applicable
do hereby state:			s the amount of the required fringe benefits as listed noted in section 4(c) below.
(1) That I pay or supervise the payment of the persons employed by		•	noted in Section 4(b) below.
Lindahl Marine Contractors, Inc	on the	(c) EXCEPTIONS	
(Contractor or Subcontractor)	Ou the	EXCEPTION (CRAFT)	EXPLANATION
Naval Station Great Lakes, Illinois ; that during the payroll per (Building or Work)			
23 day of September 2013 and ending the 29 day of Se	eptember 2013		
all persons employed on said project have been paid the full weekly wages earned, been or will be made either directly or indirectly to or on behalf of said	that no rebates have		
Lindahl Marine Contractors, Inc	from the full		
(Contractor or Subcontractor)	mont die 120		
weekly wages earned by any person and that no deductions have been made either from the full wages earned by any person, other than permissible deductions as defit 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, a 63 Start. 108, 72 Start. 967; 76 Start, 357; 40 U.S.C. § 3145), and described below:	ned in Regulations, Part		
1999			
	· · · · · · · · · · · · · · · · · · ·	REMARKS:	
(2) That any payrolls otherwise under this contract required to be submitted for correct and complete; that the wage rates for laborers or mechanics contained there applicable wage rates contained in any wage determination incorporated into the con- set forth therein for each laborer or mechanic conform with the work he performed.	ein are not less than the		
(3) That any apprentices employed in the above period are duly registered in a begrogram registered with a State apprenticeship agency recognized by the Bureau of Training, United States Department of Labor, or if no such recognized agency exists with the Bureau of Apprenticeship and Training, United States Department of Labor.	Apprenticeship and in a State, are registered		
(4) That:			1
(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUN	IDS, OR PROGRAMS	NAME AND TITLE (b) (6)(b) (6)	SIGNATURE
 in addition to the basic hourly wage rates paid to each labor 	er or mechanic listed in	Office Manager	(D)(b)
the above referenced payroll, payments of fringe benefits a have been or will be made to appropriate programs for the ber except as noted in section 4(c) below.	as listed in the contract	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE S SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION 31 OF THE UNITED STATES CODE.	TATE N. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

Wage and Hour Division

PAYROLL



(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

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Rev. Dec. 2008

NAME OF CONTRACTOR OR SUBCONTR		Contractors, Inc								ADDRE	SS 740 Twin Minooka			-16					: 1235-0008 01/31/2015	
PAYROLL NO. 003	1 Wallie	FOR WEEK ENDING		0/06/2	2013					PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois PROJECT OR CONTRACT N40083-12-C-3015										
(1)	(2) ENO	(3)	18r.	М		W DAY	ONA T	DATE F	s s	(5)	(6)	(7)			D€D	(8) UCTIONS			(9) NET	
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO, OF WITHFOLDING EXEMPTIONS	WORK CLASSIFICATION	oT.O	30			03 RKED	04 EACH	05 06	TOTAL	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	State	County	OTHER	TOTAL DEDUCTIONS	WAGES PAID	
(b) (6)	3	Operating Enginners FLT Class 1	0	2.00	2.00	2.00	4.00	2.50 8.00	_	4.50 24.00	\$76.95	\$1,577.48	\$124.81	\$169.89	\$53.51	\$8.16	\$40.87	\$397.24	\$1,680.24	
		Operating	0	2.00	2.00	2.00	4.00	2,50		4.50	\$76.95	\$2,077.48								
(D)(D)	8	Enginners FLT Class 1	s	2.00	2.00	¥.00	4.00	B.00		24.00	\$1.30	\$2,290.48	\$141.42	\$146.19	\$62.85	\$57.86	\$46.40	\$454.72	\$1,835.76	
(b) (6)	1	Operating Enginners FLT Class 1	φ 9	2,00	2,00	2.00 8.00	4.00	2.50 8.00	-	4.50 24.00	\$76.95 51.30	\$1,577.48	\$123.91	\$297.29	\$54.41	\$50,69	\$40.57	\$566.87	\$1,098.61	
		Operating	٥			2,00		2.50		4.50	\$76.95	\$1,665.48 \$1,541.48								
(b) (6)	2	Enginners FLT Class 1	s	2,00	2,09	E,00	4,00	8.00		24.00	49,80	\$2,065.48	\$123.91	\$278.54	\$80.98		\$40.57	\$524.00	\$1,541.48	
$\langle h \rangle \langle e \rangle$	1	Operating Enginners FLT Class 1	٥	<u> </u>		2.00		2.50	_	4.50	\$76.95	\$1,372.28	\$108.08	\$148.32	\$70.64	5	\$35.39	\$362.43	\$1,403.85	
(D)		Operating	0	2.00	2.00	8,00		2.50		20.00	\$74.70	\$1,766.28 \$585.15	1							
(b) (6)	1	Enginners FLT Class 1	s				-	8.00		8.00	49,80	\$2,181.15	\$164.34	\$439.70	\$105.44		\$54.56	\$764.04	\$1,417.11	
		Operating Engineers	٥					2.50		2.50	\$74.70	\$585.15	\$142,25	\$379.87	\$92.98		\$46.83	\$661.93	\$1,229.22	
		FLT Class 1	s					x.00		8.00	49.80	\$1,891.15		\$575.87	372.76		340.03	3001.55	3.,523,12	
			0							-		/								

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DCL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and contracting sponding that the payrolls are correct and contracting sponding that the payrolls are correct and contracting agencies receiving this information review the information to determine that employees have received legally required wage rate for the work performed. DCL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date 10/10/2013	
(b) (6)	Office Manager
(Name of Signatory	Party) (Title)
do hereby state;	
(1) That I pay or supervise the	e payment of the persons employed by
Lin	dahl Marine Contractors, Inc
(C	ontractor or Subcontractor) on the
Naval Station Great La	kes, Illinois; that during the payroll period commencing on the
(Building or Work)	
30 day of September	
	of have been paid the full weekly wages earned, that no repates have
Lind	ahl Marine Contractors, Inc
	from the full Contractor or Subcontractor)
30 ctalt. 100, 72 ctat. 307, 70 stat	. 357; 40 U.S.C. § 3145), and described below:
	and described below.
	and described below.
	and described below.
(2) That any payrolls otherwis correct and complete; that the wag applicable wage rates contained in set forth therein for each laborer or (3) That any apprentices emple program registered with a State ap Training, United States Departmen	e under this contract required to be submitted for the above period are e rates for laborers or mechanics contained therein are not less than the any wage determination incorporated into the contract; that the classification mechanic conform with the work he performed. Dyed in the above period are duly registered in a bona fide apprenticeship prenticeship agency recognized by the Bureau of Apprenticeship and tof Labor, or if no such recognized agency exists in a State, are registered and Training, United States Department of Labor.

10/10/2013

(b) WHERE FRINGE BENEFITS ARE PAID IN (٠,٨	C.

-	Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed
	in the contract, except as noted in section 4(n) below

(c) EXCEPTIONS

(c) Excernions	
EXCEPTION (CRAFT)	EXPLANATION

THE STATE OF THE S	
REMARKS:	
	رند <i>ا</i>
NAME AND TITLE b) (6)(b) (6)	SIGNATURE
Office Manager	(b) (6)(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAT SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

OR SUBCOUTDACTOR FR

Wage and Hour Division

NAME OF CONTRACTOR [7]

PAYROLL



(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

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Rev. Dec. 2008

	Lindahl Marine Contractors, Inc											ADDRESS 740 Twin Rail Dr Minooka IL 60447								: 1235-000 01/31/201		
PAYROLL NO. 004	THE PROPERTY OF	FOR WEEK ENDIN	_	0/13/	2013						PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois PROJECT OR CONTRACT N40083-12-C-3015											
(1)	(2)	(3)			[4) DAY	AND	DATE	Ε		(5)	(6)	(7)	OIS			(9)					
NAME AND INDIVIDUAL IDENTIFYING NUMBER	SCD:NG FROMS		¥ST,	М	Т	w	Υ	F	s	S						DED	(8) UCTIONS			NET		
(e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	ко, оғ Мітеноцока Ехеметтока	WORK CLASSIFICATION	oI.			09 WOR	10 RKED		12 H DAY		TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	State	County	OTHER	TOTAL DEDUCTIONS	WAGES PAID		
(h) (6)	3	Operating Enginners FLT Class 1	٥	4.50		3.00	\dashv		******		13.50	\$76.95	\$2,783.03	\$219.81	\$465.58	\$95.73	\$14.37	\$71.96	\$867.45	\$2,415.5		
			s	8.00	2,00	90,8	R.OC	8.00			34.00	51.30	\$3,283.03									
(h) (6)	8	Operating Enginners	٥	4,50		3.00	3.00	3.00			13.50	\$76.95	\$2,783.03	\$219.81	\$ 371.83	\$97.69	\$89.93	\$71.96	\$851.22	\$2,431.8		
		FLT Class 1	s	8,00	2.00	3,00	8,00	\$.00			34.00	51.30	\$3,283.03									
(h) (6)		Operating Enginners	٥			3.00	3.00	3,00			9.00	\$74.70	\$2,006.10	\$155.57	\$407.59	\$68.49	\$63,65	#40.10	******	\$1,622.0		
(D)	<u> </u>	FLT Class 1	3		2,00	8,00	8.0 0	8.00			26.00	\$1,30	\$2,367.10	3133.37	\$401.Jy	308,49	\$65,65	\$49.18	\$744.48	\$1,022.0		
(h) (6)	2	Operating Enginners	٥	6.00		5,50					11.50	\$76.95	\$1,808.33	\$164.73	\$420.12	\$107.67		\$54.11	2717.60			
(D)		FLT Class 1	s	8.00	2.00	8,0D					18.00	51,30	\$2,389.33	0101113	3420.12	\$107.07		\$34.JI	\$746.63	\$1,642.7		
(h) (6)	1	Operating Enginners	۰	4.50		3.00	3,00	2,09			13.50	\$76.95	\$2,783.03	****	\$592.42	615401						
(\mathbf{D})		FLT Class 1	s	8,00	2,00	K.00	8.00	8,60			34.00	51,30	\$3,688.03	\$231,40	\$392.42	\$164.31		\$82.48	\$1,090.61	\$2,597.4		
(b) (6)	1	Operating Enginners	٥	4.50	_	3,00	3.00	3.00			13.50	\$76.95	\$2,783.03	\$219.58	\$641.86	\$141,54		\$71.88	\$1,074.86	\$2,205.1		
(\mathbf{D})		FLT Class 1	s	8.00	2,00	R_00	8.00	8,00			34.00	51.30	\$3,280.03	0217.50	\$041.00	9141,54		271.00	\$1,074.00	\$2,203.1		
		Operating Engineers	0			4.00			-		4.00	\$74.70	\$796.80	\$114.03	\$283.78	\$ 74. 5 3		F27.00	#510.04	61 120 2		
		FLT Class 1	s		2,00	8.00					10.00	49.80	\$1,640.00	3114.03	9403./0	\$14.33		\$37.90	\$510.24	\$1,129.7		
			٥																			
			s																			

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "turnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal egency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed, DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and tringe benefits.

Public Burden Statement

Date10/16/2013				
(b) (6)(b) (6)	Office Manager	(b) WHERE	E FRINGE BENEFITS ARE PAID I	N CASH
1, (Name of Signatory Party)		 [Each laborer or mechanic !	isted in the above referenced payroll has been paid,
do hereby state:	(Title)		as indicated on the payroll,	an amount not less than the sum of the applicable
•			in the contract, except as n	the amount of the required fringe benefits as listed oted in section 4(c) below.
(1) That I pay or supervise the payment of the p		(c) EXCEP		
Lindahl Marine Co		on the	TIONS	
(Contractor or Subc	ontractor)		EXCEPTION (CRAFT)	EXPLANATION
Naval Station Great Lakes, Illinois	; that during the payroll period commencing	on the		
(Building or Work) 07	12 Opptobal 0	2040		· ·
cay or,, and e	day of	2013		
all persons employed on said project have been paid been or will be made either directly or indirectly to or	the full weekly wages eamed, that no rebates to on behalf of said	have		
Lindahl Marine Con	tractors, Inc	a tha full		
(Contractor or Sub		n the full		
weekly wages earned by any person and that no dec	fuctions have been made either directly or indirec-	ctly		
from the full wages earned by any person, other than 3 (29 C.F.R. Subtitle A), issued by the Secretary of I:	permissible deductions as defined in Regulation	ne Port	· · · · · · · · · · · · · · · · · · ·	
63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. §	3145), and described below:	nat 946,		
				
- Mill				
100				
	747.01	REMARKS:		
703 TO	_			
(2) That any payrolls otherwise under this control correct and complete; that the wage rates for laborer	act required to be submitted for the above period some mechanics contained therein are not loss the	i are		
applicable wage rates contained in any wage determined	nation incorporated into the contract: that the clas	ssifications		
set forth therein for each laborer or mechanic conform	n with the work he performed.			
(3) That any apprentices employed in the above to	period are duly registered in a bona fide apprentic	iceship		
program registered with a State apprenticeship agent Training, United States Department of Labor, or if no	V recognized by the Sureau of Apprenticeship or	nd .		
with the Bureau of Apprenticeship and Training, Unite	d States Department of Labor.	gistered		
(4) That:	•			4
	TO APPROVED PLANS, FUNDS, OR PROGRA	AMS NAME AND TITLE		SIGNATURE
[7]		(b) (b)		(b) (6)(b) (6)
 in addition to the basic hourty 	wage rates paid to each laborer or mechanic list			
have been or will be made to a	payments of fringe benefits as listed in the co ppropriate programs for the benefit of such emple	IOVERS SUBCONTRACTOR	LTO CIVIL OR CRIMINAL PROSECUTION	ATEMENTS MAY SOLUECT THE CONTRACTOR OR SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE
except as noted in section 4(c)	below.	31 OF THE UNITED	STATES CODE.	The second secon

PAYROLL

Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division
Rev. Dec. 2008

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OR SUBCONTRACTOR 7 ADDRESS 10134 N. Port Washington Road, Mequon, WI 53092 NAME OF CONTRACTOR OMB No.: 1235-0008 Expires: 01/31/2015 Edward E. Gillen Marine, LLC PROJECT OR CONTRACT NO. FOR WEEK ENDING PROJECT AND LOCATION PAYROLL NO. Clean Raw Water Intake 2 10/20/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (4) DAY AND DATE (7) (3) (1) DEDUCTIONS M W Th F Sa Su NET NAME AND INDIVIDUAL IDENTIFYING NUMBER GROSS WITH-WAGES 14 15 17 18 19 16 20 State (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY TOTAL AMOUNT HOLDING TOTAL PAID WORK RATE Withholdin HOURS WORKED EACH DAY FOR WEEK OF PAY EARNED FICA OTHER DEDUCTIONS CLASSIFICATION HOURS TAX NUMBER) OF WORKER \$1,324.30 0.00 0.00 0.00 6.00 0.00 5.00 0.00 \$78.85 Marine Crane Operator -Foreman \$101.31 \$238.36 \$64.69 \$74.35 \$478.71 \$845.59 10 8.00 0.00 0.00 0.00 16.00 53.20 0.00 8.00 0.00 \$2,993.72 19.00 Marine Equipment 0.00 3.00 2.00 2.00 12.00 \$66.53 Operator -\$60.83 1 \$229.02 \$676.40 \$189.74 \$1,155.99 \$1.837.73 Deck Engineer 39.00 44.35 9.00 0.00 10.00 10.00 10.00 0.00 0.00 \$3,365.68 \$70.68 Marine Equipment 0.00 5.00 4.00 4.00 12.00 26.00 Operator -\$2,083.97 \$257.47 \$663.82 \$164.85 \$195.57 \$1,281.71 2 Deck Engineer 8.00 0.00 8.00 8.00 8.00 0.00 32.00 47.75 \$1,882.30 5.00 \$76.60 Marine Excavator 00.0 3.00 2.00 0.00 \$143.99 2 Operator \$236.58 \$90.08 \$111.66 \$582.31 \$1,299.99 29.00 0.00 9.00 0.00 10.00 10.00 0.00 0.00 51.70 \$2,639.40 \$74.70 Marine Equipment 0.00 0.00 0.00 2.00 2.00 12.00 16.00 2 Operator -\$201.91 \$425.86 \$166.41 \$51.94 \$846.12 \$1,793,28 Tug Captain 9.00 00.0 9.00 10.00 10,00 0.00 0.00 29.00 49.80 \$722.10 Marine Equipment 0.00 0.00 3.00 0.00 0.00 0.00 3.00 \$74.70 Operator -\$55.24 \$130.96 \$40.98 \$14.40 \$241.58 \$480.52 1 Tug Captain 0.00 0.00 10.00 0.00 0.00 0.00 0.00 10.00 49.80

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. § 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors performing work on Federally financed or assisted construction contracts to "turnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are to the work performed. DOL and federal contracting agencies receiving this information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date10/23/2013		(h) WHERE FRIN	NGE BENEFITS ARE PAID I	N CASH
. Andrea Jackson	President			
I, (Name of Signatory Party)	(Title)	□-	Each laborer or mechanic li	isted in the above referenced payroll has been paid, an amount not less than the sum of the applicable
do hereby state:			basic hourly wage rate plus	the amount of the required fringe benefits as listed
(1) That I pay or supervise the payment of the persons	omployed by		in the contract, except as no	oted in section 4(c) below.
	20. 20. 200-	(c) EXCEPTIONS	3	
Edward E. Gillen Marine	' on the			EVEL LULEION
(Contractor or Subcontractor		EXCEP	TION (CRAFT)	EXPLANATION
	at during the payroll period commencing on the			
(Building or Work)	ne 20th day of October , 2013		-	
all persons employed on said project have been paid the full been or will be made either directly or indirectly to or on beha				
Edward E. Gillen Marine,	from the full			
(Contractor or Subcontrac	tor)			
weekly wages earned by any person and that no deductions from the full wages earned by any person, other than permiss 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor une 63 Start, 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145),	sible deductions as defined in Regulations, Part der the Copeland Act, as amended (48 Stat. 948,			
63 Start. 108, 72 Stat. 967, 76 Stat. 357, 40 U.S.C. 9 3145),	and described below.			
		REMARKS:	140	
		SAMESTON AND THE STATE OF SAMESTA		
(2) That any payrolls otherwise under this contract requ correct and complete; that the wage rates for laborers or me applicable wage rates contained in any wage determination ir set forth therein for each laborer or mechanic conform with the	chanics contained therein are not less than the accrporated into the contract; that the classification	ns		
(3) That any apprentices employed in the above period a program registered with a State apprenticeship agency recog Training, United States Department of Labor, or if no such re with the Bureau of Apprenticeship and Training, United State	nized by the Bureau of Apprenticeship and cognized agency exists in a State, are registered			
(4) That:				Lawrence
(a) WHERE FRINGE BENEFITS ARE PAID TO AP	PROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE Andrea Jackson, Pres	sident	SIGNATURE
in addition to the basis beauty were a	ates paid to each laborer or mechanic listed in	Andrea Jackson, Pres	nuoill	andrea Jackson
the above referenced payroll, payme	nts of fringe bene fits as listed in the contract			ATEMENTS MAY SUBJECT THE CONTRACTOR OR
have been or will be made to approprie except as noted in section 4(c) below.	ate programs for the benefit of such employees,	SUBCONTRACTOR TO CIV 31 OF THE UNITED STATE		SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITL

PAYROLL

Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division

Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCONTR										ADDRE	^{SS} 10134 N.	Port Washing	gton Road	l, Mequon,	WI 53092	2		OMB No. Expires:	: 1235-0008 01/31/2015	
PAYROLL NO.	rd E. G	FOR WEEK ENDING		0/27/2	013					Clea	PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois						PROJECT OR CONTRACT NO. N40083-12-C-3015			
(1)	(2) No sy	(3)	ST.	М	_	DAY AI	_	_	Su	(5)	(6)	(7)			DED	(8) UCTIONS			(9)	
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. OR	21	22 2: DURS V	3 2	4 2	5 26	27	-	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	State Withholding		OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK	
(h) (6)	1	Marine Equipment Operator -	Н	\vdash	2.00 0.0	+	+	+	+	-	\$66.53	\$1,962.53	\$150.12	\$387.68	\$122.41		\$40.42	\$700.63	\$1,261.90	
		Deck Engineer Marine Equipment	s	\vdash	2.00 2.0	+	+	+	-	6.00	\$70.68	\$2,334.08								
(b) (6)	2	Operator - Deck Engineer	s		10.00 0.0	+	.00 10.	+	0.00				\$178.56	\$349.53	\$112.67		\$145.75	\$786.51	\$1,547.57	
	2	Marine Equipment Operator -	٥	2.00	2.00 0.0	00 0.0	00 0.0	0 4.50	0.00	8.50	\$74.70	\$2,203.65	\$168.57	\$316.92	\$138.08		\$44.03	\$667.60	\$1,536.05	
	-	Tug Captain	s	10.00	10.00 2.0	00 9.5	50 0.0	0.00	0.00	31.50	49.80.									
			s				+													
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date	10/30/2013			(b) WHERE FRI	NGE BENEFITS ARE PAID IN	N CASH
	Andrea Jackson	President			- 1111	to the state of th
J	(Name of Signatory Party)	(Title)		□-	as indicated on the payroll.	sted in the above referenced payroll has been paid, an amount not less than the sum of the applicable
do herel	by state:				basic hourly wage rate plus in the contract, except as no	the amount of the required fringe benefits as listed
(1)	That I pay or supervise the payment of the pers	sons employed by		(c) EXCEPTION	S	
	Edward E. Gillen M.	arine, LLC	on the	(c) EXOLI HOI		1
	(Contractor or Subcon	tractor)		EXCEP	TION (CRAFT)	EXPLANATION
		_; that during the payroll period com	mencing on the			
	(Building or Work)	074	2042			
		ng the 27th day of October				
all perso been or	ons employed on said project have been paid the will be made either directly or indirectly to or on	e full weekly wages earned, that no behalf of said	rebates have			
***************************************	Edward E. Gillen Mar	1931 (1735 - 1735 (1735	from the full			
	(Contractor or Subco	,				
weekly v	wages earned by any person and that no deduc full wages earned by any person, other than pe	tions have been made either directly	or indirectly			
3 (29 C.	Fill wages earned by any person, other than per F.R. Subtitle A), issued by the Secretary of Labo 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 31	or under the Copeland Act, as amend	led (48 Stat. 948,			
-						
-						
9				REMARKS:		
correct a	That any payrolls otherwise under this contract and complete; that the wage rates for laborers on the wage rates contained in any wage determinated therein for each laborer or mechanic conform wage.	r mechanics contained therein are no ion incorporated into the contract; that	ot less than the			
program	That any apprentices employed in the above per n registered with a State apprenticeship agency , United States Department of Labor, or if no su Bureau of Apprenticeship and Training, United S	ecognized by the Bureau of Apprenti ch recognized agency exists in a Stat	ceship and			
(4)	That:			NAME AND TITLE		SIGNATURE
	(a) WHERE FRINGE BENEFITS ARE PAID T	O APPROVED PLANS, FUNDS, OR	PROGRAMS	Andrea Jackson, Pre	esident	andria Jackson
	_ in addition to the basic hourly wa	age rates paid to each laborer or me	chanic listed in		100 miles (100 miles (anoun gere.
	the above referenced payroll, pay have been or will be made to app	ayments of fringe benefits as listed ropriate programs for the benefit of su	in the contract	THE WILLFUL FALSIFIC SUBCONTRACTOR TO CI 31 OF THE UNITED STATE	VIL OR CRIMINAL PROSECUTION.	ATEMENTS MAY SUBJECT THE CONTRACTOR OR SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE
	except as noted in section 4(c) be	HUW.				

PAYROLL

Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division
Rev. Dec. 2008

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ADDRESS 10134 N. Port Washington Road, Mequon, WI 53092 OR SUBCONTRACTOR [7] NAME OF CONTRACTOR OMB No.: 1235-0008 Expires: 01/31/2015 Edward E. Gillen Marine, LLC PROJECT OR CONTRACT NO. PROJECT AND LOCATION FOR WEEK ENDING PAYROLL NO. Clean Raw Water Intake 4 11/03/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (4) DAY AND DATE (1) (3) DEDUCTIONS M W Th F Sa Su NET NAME AND INDIVIDUAL IDENTIFYING NUMBER **GROSS** WITH-WAGES 29 30 31 2 State PAID (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY WORK TOTAL RATE AMOUNT HOLDING Withholding FOR WEEK OTHER DEDUCTIONS HOURS WORKED EACH DAY OF PAY FICA NUMBER) OF WORKER CLASSIFICATION HOURS EARNED TAX \$2,040.16 12.00 8.00 0.00 2.00 0.00 2.00 \$66.53 Marine Equipment Operator -\$156.07 \$409.41 \$127.45 \$41.58 \$734.51 \$1,305.65 Deck Engineer 28.00 44.35 0.00 0.00 0.00 10.00 8.00 10.00 0.00 \$1,072.49 Marine Equipment 0.00 0.00 2.00 0.00 0.00 0.00 0.00 2.00 \$70.68 Operator -\$82.04 \$97.25 \$49.58 \$67.66 \$296.53 \$775.96 2 Deck Engineer 0.00 10.00 0.00 19.50 47.75 0.00 9.50 0.00 \$2,328.15 8.00 12.50 \$74.70 Marine Equipment 0.00 2.00 0.00 2.50 0.00 \$1,609.78 Operator -\$178.11 \$348.05 \$718.37 \$146.17 \$46.04 2 Tug Captain 0.00 0.00 10.00 8.00 10.00 0.00 0.00 28.00 49.80 \$1,371.80 \$78.85 0.00 0.00 0.00 0.00 4.00 8.00 12.00 Marine Equipment Operator - Foreman \$102.88 \$243.76 \$66,92 \$77.24 \$490.80 \$881.00 8.00 0.00 0.00 0.00 0.00 8.00 0.00 53.20

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date	11/03/2013			(b) WHERE FRINGE BEN	EFITS ARE PAID I	N CASH
1,	Andrea Jackson (Name of Signatory Party)	President (Title)		as indica	ated on the payroll,	sted in the above referenced payroll has been paid, an amount not less than the sum of the applicable the amount of the required fringe benefits as listed
do hereb	O ■ mag th of the plant of					oted in section 4(c) below.
(1)	That I pay or supervise the payment of the per			(c) EXCEPTIONS		
	Edward E. Gillen M		on the			
	(Contractor or Subcor	ıtractor)		EXCEPTION (CR.	AFT)	EXPLANATION
		; that during the payroll period comme	encing on the			
2041-	(Building or Work)	3rd November	2013			
28th		ding the 3rd day of November				
all perso been or	ns employed on said project have been paid th will be made either directly or indirectly to or or	e full weekly wages earned, that no red behalf of said	oates nave			
	Edward E. Gillen Ma	rine, LLC	from the full			
***************************************	(Contractor or Subco	ontractor)				
weekly v	wages earned by any person and that no dedu	ctions have been made either directly or	indirectly_			
3 (29 C.I	full wages earned by any person, other than p F.R. Subtitle A), issued by the Secretary of Lab 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3	oor under the Copeland Act, as amended	ulations, Part d (48 Stat. 948,			
-						
7						
				REMARKS:		
	10 M		a transport American American			
correct a applicab	That any payrolls otherwise under this contract and complete; that the wage rates for laborers alle wage rates contained in any wage determinate therein for each laborer or mechanic conform	or mechanics contained therein are not lation incorporated into the contract; that t	less than the			
program	That any apprentices employed in the above per registered with a State apprenticeship agency , United States Department of Labor, or if no su Bureau of Apprenticeship and Training, United	recognized by the Bureau of Apprentices uch recognized agency exists in a State,	ship and			
(4)	That: (a) WHERE FRINGE BENEFITS ARE PAID	TO APPROVED PLANS FLINDS OR PE	ROGRAMS	NAME AND TITLE		SIGNATURE
	8.30 8.500	TO ALL HOVED LEANS, LONDS, ON FI	(OO) WINO	Andrea Jackson, President		andrea Jackson
	 in addition to the basic hourly w 	age rates paid to each laborer or mech	anic listed in			
	the above referenced payroll, p have been or will be made to ap except as noted in section 4(c) b	payments of fringe bene fits as listed in propriate programs for the benefit of such below.	the contract n employees,			TATEMENTS MAY SUBJECT THE CONTRACTOR OR . SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

PAYROLL

Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division

Rev. Dec. 2008

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NAME OF CONTRACTOR OR SUBCONTRA		1-1-2h									ADDRE	^{SS} 10134 N.	Port Washing	gton Road	I, Mequon,	WI 53092	2			1235-0008
PAYROLL NO.												CT AND LOCATI		ois				OR CONTRAC 12-C-3015		
(1)	(2) SN SN	(3)	ST.	М		DAY			Sa	Su	(5)	(6)	(7)			DED	(8) UCTIONS			(9)
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. OR	4	5	$\overline{}$	7	8	9	10	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	State Withholding		OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK
(b) (6)	1	Marine Equipment Operator - Deck Engineer	0	0.00	\dashv	+	0.00	\dashv	0.00	0.00	8.00	\$66.53	\$354.80	\$27.14	\$57.92	\$21.64		\$7.44	\$114.14	\$240.66
(b) (6)	2	Marine Equipment Operator -	0	-	0.00	+	0.00	\dashv	0.00		0.00	\$70.68	\$1,050.50	\$80.36	\$148.55	\$50.56		\$65.16	\$344.63	\$705.87
(D)	2	Deck Engineer	S	6.00	0.00	8.00 2	8.00	\dashv	0.00		22.00	47.75	\$298.80	\$60.50	3140.33	330.36		303.10	\$344.03	\$705.87
	2	Marine Equipment Operator - Tug Captain	o		0.00	-	0.00	-	0.00	0.00	6.00	\$74.70	5276.60	\$22.86	\$41.94	\$18.70		\$6.09	\$89.59	\$209.21
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	e:		s		_															
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			٥																	
			5		+	+	_													
			o s		+	+														

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date	11/13/2013			(b) WHERE FRINGE BENEFITS	ADE DAID IN CASH	
	Andrea Jackson	President		(b) WHERE PRINGE BENEFITO	ARE I AID IN CACIT	
I,do hereb	(Name of Signatory Party)	(Title)		as indicated or basic hourly wa	or mechanic listed in the above referer in the payroll, an amount not less than age rate plus the amount of the requir become as noted in section 4(c) below	the sum of the applicable ed fringe benefits as listed
(1)	That I pay or supervise the payment of the pers	ons employed by			, except us noted in econom i(e) select	
1. 2.	Edward E. Gillen Ma	arine, LLC	on the	(c) EXCEPTIONS		
	(Contractor or Subcont	ractor)	On the	EXCEPTION (CRAFT)	EXP	LANATION
	(Building or Work)	; that during the payroll period comments on the 10th day of November	ncing on the			
all person	ns employed on said project have been paid the will be made either directly or indirectly to or on l	full weekly wages earned, that no reb	ates have			
	Edward E. Gillen Mari	ne, LLC	from the full			
	(Contractor or Subcor	ntractor)				
from the 3 (29 C.F	rages earned by any person and that no deduct full wages earned by any person, other than per F.R. Subtitle A), issued by the Secretary of Labo 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 31-	rmissible deductions as defined in Regu or under the Copeland Act, as amended	ılations, Part			
9						
·						
ų.				REMARKS:		
correct a	That any payrolls otherwise under this contract nd complete; that the wage rates for laborers or e wage rates contained in any wage determinati therein for each laborer or mechanic conform w	r mechanics contained therein are not li ion incorporated into the contract; that the	ess than the			
program Training.	That any apprentices employed in the above peri registered with a State apprenticeship agency of United States Department of Labor, or if no suc Bureau of Apprenticeship and Training, United S	ecognized by the Bureau of Apprentices on recognized agency exists in a State, a	ship and			
(4) T	hat: (a) WHERE FRINGE BENEFITS ARE PAID TO	O APPROVED PLANS, FUNDS, OR PR	OGRAMS	NAME AND TITLE Andrea Jackson, President	SIGNATURE CON COLUMN	Jackson
	the above referenced payroll, pa	ge rates paid to each laborer or mecha yments of fringe bene fits as listed in opriate programs for the benefit of such low.	the contract	THE WILLFUL FALSIFICATION OF ANY OF SUBCONTRACTOR TO CIVIL OR CRIMINAL I 31 OF THE UNITED STATES CODE.	THE ABOVE STATEMENTS MAY SUBJECT T	HE CONTRACTOR OR

PAYROLL

Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

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Rev. Dec. 2008 NAME OF CONTRACTOR OR SUBCONTRACTOR [7] 10134 N. Port Washington Road, Mequon, WI 53092 OMB No.: 1235-0008 Expires: 01/31/2015 Edward E. Gillen Marine, LLC PROJECT OR CONTRACT NO. FOR WEEK ENDING PROJECT AND LOCATION PAYROLL NO. Clean Raw Water Intake 11/17/2013 6 N40083-12-C-3015 Naval Station Great Lakes, Illinois (4) DAY AND DATE (9) (1) (2) (3)(8) DEDUCTIONS W Sa Th F Su M NET NAME AND INDIVIDUAL IDENTIFYING NUMBER WAGES **GROSS** WITH-12 13 14 15 16 17 State TOTAL PAID (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY TOTAL RATE AMOUNT HOLDING Withholding HOURS WORKED EACH DAY OF PAY EARNED FICA TAX OTHER DEDUCTIONS FOR WEEK NUMBER) OF WORKER CLASSIFICATION HOURS \$1,286.16 0.00 0.00 0.00 1.00 \$66.53 Marine Equipment 1.00 Operator -\$454.91 \$831.25 \$98.40 \$249.65 \$80.07 \$26.79 1 Deck Engineer 44.35 27.50 8.00 0.00 9.50 0.00 0.00 0.00 10.00 \$2,062.83 Marine Equipment 0.00 0.00 0.00 0.00 0.00 2.50 \$70.68 2.50 0.00 2 Operator -\$157.81 \$340.86 \$100.12 \$42.96 \$641.75 \$1,421.08 Deck Engineer 8.00 9.50 39.50 47.75 0.00 10.00 0.00 2.00 10.00 \$1,444.20 \$74.70 Marine Equipment 1.00 0.00 0.00 0.00 0.00 1,00 0.00 0.00 Operator -\$110.48 \$29.38 \$1,017.55 \$196.55 \$90.24 \$426.65 2 Tug Captain 8.00 0.00 9.50 0.00 0.00 27.50 49.80

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date 11/27/2013		(b) WHERE FRINGE BENEFITS ARE PAID I	N CASH
. Andrea Jackson	President		
I,(Name of Signatory Party)	(Title)		isted in the above referenced payroll has been paid, an amount not less than the sum of the applicable
do hereby state:	(******)	basic hourly wage rate plus	the amount of the required fringe benefits as listed
Section Productions Value Committee	6 the manager completed by	in the contract, except as n	oted in section 4(c) below.
(1) That I pay or supervise the payment o	Gillen Marine, LLC	(c) EXCEPTIONS	
19 PRO 2000 TRANSPORT TO THE SECOND STATE OF S	r Subcontractor) on the	EXCEPTION (CRAFT)	EXPLANATION
Clean Raw Water Intake	; that during the payroll period commencing on the	EXCELLION (CION 1)	EXCENTION
(Building or Work)	, that during the payron period commencing on the		
	and ending the 17th day of November 2013		
all persons employed on said project have been been or will be made either directly or indirectly	n paid the full weekly wages earned, that no rebates have voto or on behalf of said		
Edward E. Gil	llen Marine, LLC from the full		,
(Contractor of	or Subcontractor)		
weekly wages earned by any person and that	no deductions have been made either directly or indirectly		
	er than permissible deductions as defined in Regulations, Part ry of Labor under the Copeland Act, as amended (48 Stat. 948, S.C. § 3145), and described below:		

		~	ia a
		REMARKS:	
correct and complete; that the wage rates for la	s contract required to be submitted for the above period are aborers or mechanics contained therein are not less than the etermination incorporated into the contract; that the classifications conform with the work he performed.		
program registered with a State apprenticeship	above period are duly registered in a bona fide apprenticeship agency recognized by the Bureau of Apprenticeship and or if no such recognized agency exists in a State, are registered public United States Department of Labor.		
(4) That:			
(a) WHERE FRINGE BENEFITS ARI	E PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE Andrea Jackson, President	SIGNATURE
in addition to the basis	hourly wage rates paid to each laborer or mechanic listed in	Anurea Jackson, President	anchia Jachso
the above referenced p have been or will be made	payroll, payments of fringe benefits as listed in the contract de to appropriate programs for the benefit of such employees,	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE S' SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION 31 OF THE UNITED STATES CODE.	
except as noted in section	on 4(c) below.		

PAYROLL

Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division

Rev. Dec. 2008

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OR SUBCONTRACTOR 7 NAME OF CONTRACTOR 10134 N. Port Washington Road, Mequon, WI 53092 OMB No.: 1235-0008 Expires: 01/31/2015 Edward E. Gillen Marine, LLC PROJECT OR CONTRACT NO. PROJECT AND LOCATION PAYROLL NO. FOR WEEK ENDING Clean Raw Water Intake 7 11/24/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (9) (4) DAY AND DATE (1) (8) DEDUCTIONS F Sa M W Th Su NET NAME AND INDIVIDUAL IDENTIFYING NUMBER WAGES **GROSS** WITH-18 19 20 21 22 23 24 State (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY TOTAL PAID TOTAL AMOUNT HOLDING WORK Withholding HOURS WORKED EACH DAY FICA OTHER DEDUCTIONS FOR WEEK OF PAY EARNED TAX CLASSIFICATION HOURS NUMBER) OF WORKER \$1,363.80 0.00 0.00 0.00 6.50 \$66.53 Marine Equipment \$84.91 \$28.41 \$482.36 Operator -\$104.33 \$264.71 \$881.44 Deck Engineer 21.00 44.35 4.00 10.00 7.00 0.00 0.00 0.00 0.00 \$1,996.05 \$70.68 Marine Equipment 0.00 9.00 1.00 0.00 0.00 10.00 0.00 0.00 Operator -\$152.70 \$329.82 \$96.88 \$118.59 \$697.99 \$1,298.06 2 Deck Engineer 4.00 7.00 8.00 27.00 47.75 8.00 0.00 0.00 0.00 \$1,531.35 6.50 \$74.70 Marine Equipment 0.00 6.50 0.00 0.00 0,00 0.00 \$1,078.94 Operator -\$117.15 \$208.41 \$31.15 \$452.41 \$95.70 2 Tug Captain 0.00 4.00 7.00 0.00 0.00 21.00 49.80 \$1,600.28, 9.50 \$78.85 Marine Equipment 0.00 8.50 1.00 0.00 0.00 0.00 \$44.75 \$91.09 Operator - Foreman \$77.88 \$476.84 \$1,123.44 10 \$263.12 16.00 4.00 8.00 4.00 0.00 0.00 0.00 53.20

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §\$ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date	11/27/2013			(b) WHERE FRINGE BENEFITS ARI	E PAID IN CASH
I,	Andrea Jackson (Name of Signatory Party)	President (Title)		as indicated on the	echanic listed in the above referenced payroll has been paid, payroll, an amount not less than the sum of the applicable rate plus the amount of the required fringe benefits as listed
do hereb	y state:			in the contract, exc	ept as noted in section 4(c) below.
(1)	That I pay or supervise the payment of the per			(c) EXCEPTIONS	
	Edward E. Gillen M		on the		EVELAMATION
	(Contractor or Subcor	12 (1.1. m.) voj 1080 vedo 4 5 (1.		EXCEPTION (CRAFT)	EXPLANATION
	Clean Raw Water Intake (Building or Work)	; that during the payroll period comme	ncing on the		
18th	_ day ofNovember,2013 _, and end	ling the 24th day of November	2013		
all perso	cay or,, and enc ns employed on said project have been paid th will be made either directly or indirectly to or on	e full weekly wages earned, that no reb	ates have		
	Edward E. Gillen Ma	rine, LLC	from the full		
-	(Contractor or Subco	ontractor)	_		
weekly v	vages earned by any person and that no dedu	ctions have been made either directly or	indirectly		
3 (29 C.I	full wages earned by any person, other than person. Subtitle A), issued by the Secretary of Lab 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3	or under the Copeland Act, as amended	(48 Stat. 948,		
				REMARKS:	
correct a	That any payrolls otherwise under this contract and complete; that the wage rates for laborers le wage rates contained in any wage determinate therein for each laborer or mechanic conforms.	or mechanics contained therein are not I tion incorporated into the contract; that t	ess than the		
program Training	That any apprentices employed in the above per registered with a State apprenticeship agency United States Department of Labor, or if no subureau of Apprenticeship and Training, United	recognized by the Bureau of Apprentices uch recognized agency exists in a State,	ship and		
(4)	That: (a) WHERE FRINGE BENEFITS ARE PAID ⁻	TO APPROVED PLANS, FUNDS, OR PF	ROGRAMS	NAME AND TITLE	SIGNATURE ANOLIA GOLDA ADOLE STATEMENTS MAY SUBJECT THE CONTRACTOR OR
	in addition to the basic bought u	rage rates paid to each laborer or mech	ania listad in	Andrea Jackson, President	andria goransc
	the above referenced payroll, p	ayments of fringe bene fits as listed in propriate programs for the benefit of such	the contract	THE WILLFUL FALSIFICATION OF ANY OF THE SUBCONTRACTOR TO CIVIL OR CRIMINAL PROS 31 OF THE UNITED STATES CODE.	ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

PAYROLL

Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division

Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

ADDRESS 10134 N. Port Washington Road, Mequon, WI 53092 NAME OF CONTRACTOR OR SUBCONTRACTOR [7] OMB No.: 1235-0008 Expires: 01/31/2015 Edward E. Gillen Marine, LLC PROJECT OR CONTRACT NO. PROJECT AND LOCATION FOR WEEK ENDING PAYROLL NO. Clean Raw Water Intake 8 12/01/2013 N40083-12-C-3015 Naval Station Great Lakes, Illinois (4) DAY AND DATE (3)(8) DEDUCTIONS M T W Th F Sa Su NET NAME AND INDIVIDUAL IDENTIFYING NUMBER GROSS WAGES 25 26 27 28 29 30 State (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY TOTAL RATE AMOUNT HOLDING TOTAL PAID WORK Withholding HOURS WORKED EACH DAY FICA OTHER DEDUCTIONS FOR WEEK NUMBER) OF WORKER CLASSIFICATION HOURS OF PAY EARNED TAX \$319.20 0.00 0.00 0.00 0.00 0.00 0.00 \$78.85 Marine Equipment 0.00 Operator -\$47.59 \$18.48 \$18.62 \$89.32 \$229.88 \$4.63 10 Foreman 6.00 53.20 6.00 0.00 0.00 0.00 0.00 0.00 0.00 \$286.50 Marine Equipment 0.00 0.00 0.00 0.00 0.00 0.00 0.00 \$70.68 Operator -2 \$21.92 \$43.75 \$13.84 \$17.80 \$97.31 \$189.19 Deck Engineer 47.75 6.00 0.00 6.00 0.00 0.00 0.00 0.00 0.00 \$298.80 0.00 \$74.70 Marine Equipment 0.00 0.00 0.00 0.00 0.00 \$217.00 Operator -\$22.85 \$34.30 \$18.53 \$6.12 \$81.80 Tug Captain 6.00 0.00 0.00 0.00 0.00 0.00 0.00 6.00 49.80

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date	12/04/2013			(h) WHERE FRING	GE BENEFITS ARE PAID IN	N CASH
	Andrea Jackson	President				
1,	(Name of Signatory Party)	(Title)				sted in the above referenced payroll has been paid, an amount not less than the sum of the applicable
do hereby	state:				pasic hourly wage rate plus in the contract, except as no	the amount of the required fringe benefits as listed of the in section 4(c) below.
(1) Th	nat I pay or supervise the payment of the perso	ons employed by			ir tilo oomilaat, onoopt ao m	λου σοσποι
	Edward E. Gillen Ma	rine, LLC	on the	(c) EXCEPTIONS		
	(Contractor or Subcontr	actor)	. On the	EXCEPTI	ON (CRAFT)	EXPLANATION
	Clean Raw Water Intake	; that during the payroll period commencing	on the			
25th	(Building or Work) day of November 2013 and ending	g the1stday ofDecember _ , _2	2013			
	employed on said project have been paid the libe made either directly or indirectly to or on b	full weekly wages earned, that no rebates	have			
	Edward E. Gillen Marii	ne, LLCfron	n the full			
	(Contractor or Subcon	tractor)				
from the fu 3 (29 C.F.F	ges earned by any person and that no deduct Il wages earned by any person, other than per R. Subtitle A), issued by the Secretary of Labor 08, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 314	missible deductions as defined in Regulation under the Copeland Act, as amended (48 S	ns, Part			
-						
						
						
<u> </u>				REMARKS:		
correct and applicable	at any payrolls otherwise under this contract of d complete; that the wage rates for laborers or wage rates contained in any wage determination erein for each laborer or mechanic conform wi	mechanics contained therein are not less the incorporated into the contract; that the cla	han the			
program re Training, U	at any apprentices employed in the above perion gistered with a State apprenticeship agency re- nited States Department of Labor, or if no suc- greau of Apprenticeship and Training, United S	cognized by the Bureau of Apprenticeship a h recognized agency exists in a State, are re	nd			
(4) Tha	a) WHERE FRINGE BENEFITS ARE PAID TO	APPROVED PLANS, FUNDS, OR PROGR	AMS	NAME AND TITLE Andrea Jackson, Presi	dent	andrea Jorchan
	the above referenced payroll, pay	pe rates paid to each laborer or mechanic li rments of fringe benefits as listed in the c opriate programs for the benefit of such emplow.	contract	THE WILLFUL FALSIFICAT	TION OF ANY OF THE ABOVE STA OR CRIMINAL PROSECUTION.	ATEMENTS MAY SUBJECT THE CONTRACTOR OR SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

U.S. Department of Labor Wage and Hour Division

PAYROLL

U.S. Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

Rev. Dec. 2008

NAME OF CONTRACTOR OR SUBCONTRA	ACTOR	_								ADDRE	SS							OMB No.: Expires:	1235-0008 01/31/2015
NORTHERN DIVERS USA PAYRCLL NO.		10404 FOX BLU FOR WEEK ENDING	-						600	PROJE	CT AND LOCATI		nis				OR CONTRAC	T NO.	
(1)	(Z) SNO	(3)	\prod		(4) D	AYA	NO DA		S	(5)	(6)	(7)			DEDI	(8) UCTIONS			(9)
NAME AND INDIVIOUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WCRK CLASSIFICATION	5 6	P '			ED E	O (I	17	TOTAL HOURS	CF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX			OTHER	TOTAL DEDUCTIONS	WAGES
(h) (6)		DECK EQUIP OPERATOR	0	_	2 0		1	+-	+	9.5	55.28 36.85	525,1680	ì						155/05
(D) (D)	-	CRAFT	0	1	8 2	- 0	1	-	12	28	77.07	120	0				-		1556 S
		FOREMAN	s		2 3	2 3	2 5	8 8		22	51.38	130.3							2343,
			o s	+	+	+	+	+	+	+									
			o s		1	+	1	Ŧ	F										
			0	1	1		1	‡	+										
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			s									<u>/_</u> ,							
			0	+	-	+		+	+										
			0.			+	+		+										

While completion of Form WH-347 is optional, it is mandatory for covered confractors performing work on Federally financed or assisted construction contracts to respond to the information collection confractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors and subconfractors performing work on Federally financed or assisted construction contracts to the weeks paid each employee during the preceding week." U.S. Department of Lebor (COL) regulations at 28 C.F.R. § 5.5(a)(3)(i) require contractors to submit weekly a copy of all gayrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Devis-Bacon prevailing wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 35 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and complete this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3582, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date Oct 14,2013		(b) WHERE FR	INGE BENEFITS ARE PAID IN	N CASH
KONNI FROSOLONE	VICE PRESIDENT		Each laborar or mach spin lin	sted in the above referenced payroll has been paid,
(Name of Signatory Party) do hereby state:	(Title)		as indicated on the payroll, a	an amount not less than the sum of the applicable the amount of the required fringe benefits as listed
(1) That I pay or supervise the payment of	the persons employed by	(c) EXCEPTION		•
	N DIVERS USA on th	ne		
	Subcontractor)		PTION (CRAFT)	EXPLANATION
Clean Raw Water Intake	that during the payroll period commencing on the	e ————		
(Building or Work) 4 day of Oct 2013	and ending the 12 day of OLL 2013	2		
all persons employed on said project have been been or will be made either directly or indirectly	paid the full weekly wages earned, that no rebates have to or on behalf of said			
NORTHERN	DIVERS USA from the	full		
(Contractor o	r Subcontractor)			
from the full wages earned by any person, other	no deductions have been made either directly or indirectly than permissible deductions as defined in Regulations, Pa y of Labor under the Copeland Act, as amended (48 Stat. § S.C. § 3145), and described below:			
		*		
		REMARKS:		
correct and complete; that the wage rates for la	contract required to be submitted for the above period are abovers or mechanics contained therein are not less than to stermination incorporated into the contract; that the classificantorm with the work he performed.	he		
program registered with a State apprenticeship	bove period are duly registered in a bona fide apprenticesh agency recognized by the Bureau of Apprenticeship and r if no such recognized agency exists in a State, are registe , United States Department of Labor.			
(4) That: (a) WHERE FRINGE BENEFITS ARE	PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE		SIGNATURE

in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

31 OF THE UNITED STATES CODE.

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

KONNI FROSOLONE / VICE PRESIDENT TOTAL

PAYROLL Wage and Hour Division



(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. Rev. Dec. 2008 NAME OF CONTRACTOR OR SUBCONTRACTOR [7] ACORESS 10404 FOX BLUFF LN OMB No.: 1235-0008

NOF	RTHEF	RN DIVERS USA												GROVE, IL 6	081					Expires:	01/31/2015
PAYRCLL NO.		FOR WEEK ENDING						,				CT AND LO							CT OR CONT		
		OCt	-	24,										at Lakes, IL				N400	83-12-C-30	015	
(1)	(2) g so	(3)		011			AND I			0.4	(5)	(6)		(7)			D	(8) EDUCTIONS			(9)
NAME AND INDIVIDUAL IDENTIFYING NUMBER	NO.		125 4	SUN		_		-	_	_		Į.						-			NET
(e.g., LAST FOUR DIGITS OF SCCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHMOLOGING EXEMPTIONS	WORK CLASSIFICATION	oT.	20 2 HOL	HS W	2 J	KED E	D4 C	25 10AY	06	TOTAL	RATE OF PA		GROSS AMOUNT EARNED	FICA	HOLDING TAX			ОТНЕ	TOTAL DEDUCTION:	WAGES PAID FOR WEEK
		DECK EQUIPMENT	0	L	1 4					1	8	55.28	3	442.24							
(h) (g)		OPERATOR	s	8	_	-	2	8			26	36.	85	958.10							1400:
(b) (6)		CRAFT	0	Ļ						3	8	77.07		110,510	.,			7	1		2363
		FOREMAN	s	8	8	1	2	8	8		34	51.3	8	1146.9				1			2363
	T		0			T	1							Γ							
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			\$		\top	1	\top	1				3									

Win to completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally finenced or assisted construction contracts to respond to the information contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Lator (DOL) regulations of 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of at payrols to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrols are correct and complete and that each laborer or machanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DCL and federal contracting agencies receiving this information to determine that employees have received legally required wages and stringe benefits.

Public Burden Statement

PAYROLL

Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm) Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

U.S. Wage and Hour Division

Rev. Dec. 2008

NAME OF CONTRACTOR OR SUBCONTRA		_									ADDINE	³⁵ 10134 N.	Port Washing	ton Road	, Mequon,	WI 53092	2		Expires:	01/31/2015
PAYROLL NO.	d E. G	FOR WEEK ENDING)/13/2	2013				279 (2007)		Clear	T AND LOCATI Raw Water Station Gre		ois				R CONTRAC		
(1)	(2) SNO SNO	(3)	ST.	M		_	AND Th		Sa	Su	(5)	(6)	(7)			DED	(8) UCTIONS			(9) NET
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO, OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. OF	7	8 OURS	9 S WO	10 RKED	I1 EAC	12 H DAY	13	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	State Withholding		OTHER	TOTAL DEDUCTIONS	WAGES PAID FOR WEEK
(b) (6)	10	Marine Crane Operator -Foreman	0 8	ivers.	0.00 2.00				0.00	0.00	6.00 34.00	\$78.85 53.20	\$2,281.90	\$168.76	\$320.14	\$106.87		\$129.27	\$725.04	\$1,556.86
(b) (6)	1	Marine Equipment Operator -	0	4.00	0.00	0.00	0.50	1.50	0.00		6.00	\$66.53	\$1,907.08	\$145.88	\$372.15	\$118.81		\$39.59	\$676.43	\$1,230.65
	Ĺ.	Deck Engineer	S	10.00	2.00	2.00	10.00	10.00	0.00	0.00	34.00	44.35	\$2,825.06							
(b) (b)	2	Marine Equipment Operator - Deck Engineer	0	4.00	2.00	2.00			0.00		17.00 34.00	\$70.68	32,823.00	\$216.13	\$472.28	\$137.22		\$167.53	\$993.16	\$1,831.90
(b) (6)	2	Marine Excavator Operator	0	4,00	0.00	0.60	0.50	1,50	0.00	0.00	6.00	\$76.60	\$2,217.40	\$169.63	\$320.36	\$106.83		\$131.40	\$728.22	\$1,489.18
-(b) (6)		Орогия	s	10.00	2.00	2.00	10.00	10.00	0.00	0.00	34.00	51.70								
(D)	2	Marine Equipment Operator - Tug Captain	0	4.00 10.00	4001002	0.00	2000	1.50	0.00	0.00	6.00 34.00	\$74.70 49.80	\$2,141.40	\$163.82	\$301.36	\$134.04		\$43.10	\$642.32	\$1,499.08
		, -5	0	10.00	2.00	2.00	10,00	10.00	0.00	0.00	34.00	49.80					1			
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			s																	
			٥														11			
			s									<i>i</i> .								

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date	10/16/2013			(b) WHERE FRING	GE BENEFITS ARE PAID IN	CASH
I,do hereby	Andrea Jackson (Name of Signatory Party) y state:	President (Title)		a t	as indicated on the payroll, a	ted in the above referenced payroll has been paid, in amount not less than the sum of the applicable he amount of the required fringe benefits as listed ted in section 4(c) below.
(1) T	That I pay or supervise the payment of the pe	rsons employed by		(c) EXCEPTIONS		
	Edward E. Gillen M		on the			
33.	(Contractor or Subco			EXCEPTI	ION (CRAFT)	EXPLANATION
		; that during the payroll period co	ommencing on the			
7+b	(Building or Work)	ding the 13th day of Octob	per 2013			
7th	_day ofOctober, _2013_, and en ns employed on said project have been paid the vill be made either directly or indirectly to or o	he full weekly wages earned, that r				
been or w	Edward E. Gillen Ma		from the full			
	(Contractor or Subc	contractor)	nom the fair			
weekly w	ages earned by any person and that no dedu	uctions have been made either direc	tly or indirectly			
from the f	full wages earned by any person, other than p F.R. Subtitle A), issued by the Secretary of La 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. §	permissible deductions as defined in bor under the Copeland Act, as amo	n Regulations, Part			
				REMARKS:		
correct a	That any payrolls otherwise under this contra ind complete; that the wage rates for laborers le wage rates contained in any wage determin therein for each laborer or mechanic conform	s or mechanics contained therein an nation incorporated into the contract;	e not less than the			
program	That any apprentices employed in the above pregistered with a State apprenticeship agency, United States Department of Labor, or if no subureau of Apprenticeship and Training, Unite	y recognized by the Bureau of Appro such recognized agency exists in a 3	enticeship and			
(4) ٦	(a) WHERE FRINGE BENEFITS ARE PAID	TO APPROVED PLANS, FUNDS, wage rates paid to each laborer or		NAME AND TITLE Andrea Jackson, Pres	sident	andria Jackson
	the above referenced payroll	payments of fringe bene fits as list ppropriate programs for the benefit of	ted in the contract	THE WILLFUL FALSIFICA SUBCONTRACTOR TO CIV 31 OF THE UNITED STATES	IL OR CRIMINAL PROSECUTION.	ATEMENTS MAY SUBJECT THE CONTRACTOR OR SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITL

Wage and Hour Division

PAYROLL



(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. Rev. Dec. 2008 NAME OF CONTRACTOR OR SUBCONTRACTOR [7] ADDRESS 10404 FOX BLUFF LN OMB No.: 1235-0008 NORTHERN DIVERS USA SPRING GROVE, IL 60081 Expires: 01/31/2015 PAYROLL NO. PROJECT AND LOCATION FOR WEEK ENDING PROJECT OR CONTRACT NO. NOV 9, 2013 Clean Raw Water Intake N40083-12-C-3015 Naval Station Great Lakes, IL (2)(4) DAY AND DATE (8) DEDUCTIONS NAME AND INDIVIOUAL IDENTIFYING NUMBER PFF GROSS WITH-(e.g., LAST FOUR DIGITS OF SOCIAL SECURITY WAGES WORK TOTAL RATE AMOUNT HOLDING TOTAL PAID NUMBER) OF WORKER CLASSIFICATION HOURS OF PAY EARNED FICA TAX OTHER DEDUCTIONS FOR WEEK DECK 2 55.28 EQUIPMENT Ю **OPERATOR** 8 36.85 77.07 CRAFT 0 0 0 **FOREMAN** 8 8 8 51.38

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federality financed or assisted construction contracts to respond to the information collection contractors performing work on Federality financed or assisted construction contracts to respond to the information collection contractors performing work on Federality financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

ulalana			
Date 11/19/2013			
KONNI FROSOLONE	VICE PRESI	DENT	
(Name of Signatory Par	rty)	(Title)	_
do hereby state:			
(1) That I pay or supervise the pay	yment of the persons employed b	by	
NOF	RTHERN DIVERS USA		
(Contra	actor or Subcontractor)	on th	ne
Clean Raw Water Intake	; that during th	ne payroll period commencing on th	ne
(Building or Work)	12 G	*(. 1 2A):	2
	013, and ending the 9		2.
all persons employed on said project ha been or will be made either directly or in	ave been paid the full weekly wag ndirectly to or on behalf of said	ges earned, that no rebates have	
	THERN DIVERS USA		
	tractor or Subcontractor)	from the	full
rom the full wages earned by any perso 3 (29 C.F.R. Subtitle A), issued by the 5 63 Start. 108, 72 Stat. 967; 76 Stat. 357	Secretary of Labor under the Cop 7; 40 U.S.C. § 3145), and describ	peland Act, as amended (48 Stat. 9 bed below:	ert 1948,
(2) That any payrolls otherwise uncorrect and complete; that the wage rate applicable wage rates contained in any set forth therein for each laborer or median.	es for laborers or mechanics cor wage determination incorporated	ntained therein are not less than th	e ations
(3) That any apprentices employed orogram registered with a State apprent fraining, United States Department of L with the Bureau of Apprenticeship and T	ticeship agency recognized by the abor, or if no such recognized ac	e Bureau of Apprenticeship and	
(4) That:	TO ARE DAID TO ADDROVED D	PLANS, FUNDS, OR PROGRAMS	Į
	TO ARE PAID TO APPROVED P	LANS, FUNDS, OR PROGRAMS	ĺ
in addition to the	basic hourly wage rates paid to need payroll, payments of fringe	each laborer or mechanic listed in	_

 (b) WHERE FRINGE BENEFITS ARE PAID IN CASH Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below. 				
(c) EXCEPTIONS				
EXCEPTION (CRAFT)	EXPLANATION			
REMARKS:				
NAME AND TITLE KONNI FROSOLONE / VICE PRESIDEN	SIGNATURE THOMASOLANO.			
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE SUBCONTRACTORTO CIVIL OR CRIMINAL PROSECUTIO 31 OF THE UNITED STATES CODE.	STATEMENTS MAY SUBJECT THE CONTRACTOR OR IN. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE			